BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images may include (but are not limited to):

- BLACK BORDERS
- TEXT CUT OFF AT TOP, BOTTOM OR SIDES
- FADED TEXT
- ILLEGIBLE TEXT
- SKEWED/SLANTED IMAGES
- COLORED PHOTOS
- BLACK OR VERY BLACK AND WHITE DARK PHOTOS
- GRAY SCALE DOCUMENTS

IMAGES ARE BEST AVAILABLE COPY.

As rescanning documents *will not* correct images, please do not report the images to the Image Problem Mailbox.

PATENT COOPERATION TREATY

From the INTERNATIONAL BUREAU

PCT

NOTIFICATION OF ELECTION

(PCT Rule 61.2)

To:

United States Patent and Trademark Office
(Box PCT)
Crystal Plaza 2
Washington, DC 20231
ETATS-UNIS D'AMERIQUE

in its capacity as elected Office

Date of mailing (day/month/year) 16 May 1997 (16.05.97)	
International application No. PCT/AU96/00664	**Applicant's or agent's file reference** VS:FP4167
International filing date (day/month/year) 22 October 1996 (22.10.96)	**Priority date** (day/month/year) 23 October 1995 (23.10.95)
Applicant RAKOCZY, Piroska, Elizabeth et al	

1. The designated Office is hereby notified of its election made:

   [X] in the demand filed with the International Preliminary Examining Authority on:

   01 May 1997 (01.05.97)

   [ ] in a notice effecting later election filed with the International Bureau on:

2. The election [X] was

   [ ] was not

   made before the expiration of 19 months from the priority date or, where Rule 32 applies, within the time limit under Rule 32.2(b).

The International Bureau of WIPO **34, chemin des Colombettes** **1211 Geneva 20, Switzerland**	Authorized officer Peggy Steunenberg
Facsimile No.: (41-22) 740.14.35	Telephone No.: (41-22) 730.91.11

Form PCT/IB/331 (July 1992)

1516218

PCT WORLD INTELLECTUAL PROPERTY ORGANIZATION
International Bureau

INTERNATIONAL APPLICATION PUBLISHED UNDER THE PATENT COOPERATION TREATY (PCT)

(51) International Patent Classification 6 : A61K 47/36, 48/00 — A1

(11) International Publicati n Number: WO 97/15330

(43) International Publication Date: 1 May 1997 (01.05.97)

(21) International Application Number: PCT/AU96/00664

(22) International Filing Date: 22 October 1996 (22.10.96)

(30) Priority Data:

PN 6161	23 October 1995 (23.10.95)	AU
PN 9047	1 April 1996 (01.04.96)	AU

(81) Designated States: AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CU, CZ, DE, DK, EE, ES, FI, GB, GE, HU, IL, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, TJ, TM, TR, TT, UA, UG, US, UZ, VN, ARIPO patent (KE, LS, MW, SD, SZ, UG), Eurasian patent (AM, AZ, BY, KG, KZ, MD, RU, TJ, TM), European patent (AT, BE, CH, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE), OAPI patent (BF, BJ, CF, CG, CI, CM, GA, GN, ML, MR, NE, SN, TD, TG).

Published
With international search report.

(71) Applicant *(for all designated States except US)*: HYAL PHARMACEUTICAL AUSTRALIA LIMITED [AU/AU]; Level 2, 44A Kings Park Road, West Perth, W.A. 6009 (AU).

(72) Inventors; and

(75) Inventors/Applicants *(for US only)*: RAKOCZY, Piroska, Elizabeth [AU/AU]; Lions Eye Institute, 2 Verdun Street, Nedlands, W.A. 6009 (AU). CONSTABLE, Ian, Jeffrey [AU/AU]; Lions Eye Institute, 2 Verdun Street, Nedlands, W.A. 6009 (AU).

(74) Agent: SANTER, Vivien; Griffith Hack, 509 St. Kilda Road, Melbourne, VIC 3004 (AU).

(54) Title: HYALURONIC ACID AS DNA CARRIER FOR GENE THERAPY AND VEGF ANTISENSE DNA TO TREAT ABNORMAL RETINAL VASCULARIZATION

(57) Abstract

The invention provides methods and compositions for gene therapy, including antisense therapy. In one embodiment, the compositions comprise hyaluronic acid to promote uptake of nucleic acid by the target cells. The invention is illustrated with reference to treatment of retinal diseases caused by neovascularisation.

FOR THE PURPOSES OF INFORMATION ONLY

Codes used to identify States party to the PCT on the front pages of pamphlets publishing international applications under the PCT.

AM	Armenia	**GB**	United Kingdom	**MW**	Malawi
AT	Austria	**GE**	Georgia	**MX**	Mexico
AU	Australia	**GN**	Guinea	**NE**	Niger
BB	Barbados	**GR**	Greece	**NL**	Netherlands
BE	Belgium	**HU**	Hungary	**NO**	Norway
BF	Burkina Faso	**IE**	Ireland	**NZ**	New Zealand
BG	Bulgaria	**IT**	Italy	**PL**	Poland
BJ	Benin	**JP**	Japan	**PT**	Portugal
BR	Brazil	**KE**	Kenya	**RO**	Romania
BY	Belarus	**KG**	Kyrgystan	**RU**	Russian Federation
CA	Canada	**KP**	Democratic People's Republic of Korea	**SD**	Sudan
CF	Central African Republic			**SE**	Sweden
CG	Congo	**KR**	Republic of Korea	**SG**	Singapore
CH	Switzerland	**KZ**	Kazakhstan	**SI**	Slovenia
CI	Côte d'Ivoire	**LI**	Liechtenstein	**SK**	Slovakia
CM	Cameroon	**LK**	Sri Lanka	**SN**	Senegal
CN	China	**LR**	Liberia	**SZ**	Swaziland
CS	Czechoslovakia	**LT**	Lithuania	**TD**	Chad
CZ	Czech Republic	**LU**	Luxembourg	**TG**	Togo
DE	Germany	**LV**	Latvia	**TJ**	Tajikistan
DK	Denmark	**MC**	Monaco	**TT**	Trinidad and Tobago
EE	Estonia	**MD**	Republic of Moldova	**UA**	Ukraine
ES	Spain	**MG**	Madagascar	**UG**	Uganda
FI	Finland	**ML**	Mali	**US**	United States of America
FR	France	**MN**	Mongolia	**UZ**	Uzbekistan
GA	Gabon	**MR**	Mauritania	**VN**	Viet Nam

HYALURONIC ACID AS DNA CARRIER FOR GENE THERAPY AND VEGF ANTISENSE DNA TO TREAT ABNORMAL RETINAL VASCULARIZATION

This invention relates to use of hyaluronic acid to target active agents which ablate the function of targeted genes in the control or treatment of disease. In one embodiment, this invention relates to a method and composition for treating ocular diseases, in particular retinal disease involving neovascularisation of the choroid and/or retina. It makes use of the phagocytic characteristic of specific cells in the eye to provide an effective manner of delivering an active agent to the target, for either short term or long term treatment of neovascularisation. The methods and compositions of the invention are useful for delivering DNA, RNA, anti-sense nucleotides, peptides or other therapeutic agents to phagocytic cells or surrounding cells.

BACKGROUND OF THE INVENTION

A) Hyaluronic Acid as an Adjuvant or Targeting Agent

Hyaluronic acid (HA) is a large, complex oligosaccharide consisting of up to 50 000 pairs of the basic disaccharide glucuronic acid-β(1-3) N-acetylglucosamine β(1-4). It is found *in vivo* as a major component of the extracellular matrix. Its tertiary structure is a random coil of about 50 nm in diameter.

HA has the ability to bind a large amount of water, which *in vivo* makes it a viscous hydrated gel with viscoelastic properties. It is found in this form in the mammalian eye, both in the vitreous and in the extracellular matrix.

HA has been used in the treatment of certain diseases and conditions of the human body both systemically and topically, because of its ability to target an active agent to sites where the disease or condition is localised (International Patent Publications No. WO 91/04058 and No. WO 93/16733). It has been shown that HA forms depots, for example at the injured carotid artery (relative to

uninjured contralateral arteries) and in colorectal tumours growing in experimental animals, and is retained in the skin of such animals. In all these cases, the sites of the deposits are areas of high HA receptor expression, indicating that HA targets specifically to tissues that are expressing high levels of these receptors, particularly to tissues undergoing unusual proliferation and migration, including tissues responding to injury, inflammation, development, and tumorigenesis.

The characteristic of HA which is important to its action as a potential adjuvant is its ability simultaneously to bind to other molecules and to bind to cell membranes. Cell surface receptors specific for HA have been identified, including the histocompatibility antigen CD44, the receptor for hyaluronic acid-mediated motility (RHAMM), intercellular adhesion factor (ICAM), and some homologous proteins in the CD44 family. The binding of virus to the cell membrane facilitated by HA would allow the usual endocytotic mechanisms of viral uptake to be more effective.

B) **Diseases of the Eye**

A variety of ocular diseases such as macular degeneration and diabetic retinopathy are characterised by neovascularisation of the choroid and/or retina. This process is the major cause of blindness in patients suffering from these conditions.

Prior Art Treatments

In age-related macular degeneration (ARMD), the formation and haemorrhaging of a subretinal neovascular membrane (SRNVM) results in rapid and substantial loss of central vision. Various treatments are available, but all are unreliable. Laser photocoagulation is the most acceptable type of treatment, but it still suffers from the disadvantages that damage by the laser rays causes dense, permanent scotoma (Schachet, 1994; Ibanez *et al*, 1995 and

Hudson *et al*, 1995) resulting in temporary loss of vision, and inability to prevent progression of the condition in th long term because of recurrence of the neovascular membrane.

Thus this treatment provides an advantage only in terms of preventing *profound* visual loss.

Similarly, surgical removal of the SRNVM or of subretinal blood, or re-positioning of the fovea by rotating the retina have largely been unsuccessful, due to post-surgical complications and to minimum or temporary improvement in vision. These invasive forms of treatment and the corresponding complications therefore far outweigh the advantages gained, and are limited in usefulness.

Administration of interferon α2a, which has some anti-angiogenic activity (Fung, 1991; Guyer *et al*, 1992 and Engler *et al*, 1994) and transplantation of retinal pigment epithelial (RPE) cells (Algvere *et al*, 1994) have also proved to be of limited usefulness, and initial promising results obtained with small groups of patients have not been confirmed in larger trials.

In addition to laser photocoagulation which, as described above, suffers from various disadvantages, the other main method of treating diabetic retinopathy is the control of blood glucose and blood pressure. The efficacy of such forms of treatment is limited by the motivation and compliance of the patient involved.

About 30% of the population above age 75 suffers from macular degeneration, and about 3 in 1000 individuals suffer from diabetic retinopathy. As each of these numbers will increase due to the aging of the population, and the increase in incidence of diabetes, there is a need for a more effective manner of treating these and other ocular diseases mediated by neovascularisation.

Mechanism of Neovascularization

Vascular endothelial cell growth factor (VEGF) is a dimeric, disulphide-bridged glycoprotein which is well-

known to be synthesised and secreted by a variety of normal as well as tumour cells. Recent observations indicate that VEGF is frequently detected in the neovascular retinal membranes of patients with diabetes (Malecaze *et al*, 1994), and in the ocular fluid from patients with either diabetic retinopathy or with central retinal vein occlusion (Aiello *et al*, 1994). More recently, it was found that VEGF expression was induced in conditions such as central vein occlusion, retinal detachment and intraocular tumours. In a rabbit model, levels of VEGF mRNA were elevated in the hypoxic region of the retina following induction of retinal vein occlusion. (Pe'er *et al*, 1995). Stimulation of VEGF expression by hypoxia has also been observed in other animal models (Pierce *et al*, 1995; Miller *et al*, 1994), and *in vitro* in all types of cell cultures (Simorre-Pinatel *et al*, 1994; Hata *et al*, 1995 and Thiema *et al*, 1995).

C) **Anti-Sense DNA and Gene Therapy in Treatment of Diseases**

The suppression of expression of genes encoding proteins which mediate undesirable activity has been achieved in a variety of situations by the introduction or *in situ* production of 'anti-sense' DNA sequences in the target cells. These anti-sense sequences are DNA sequences which, when transcribed, result in synthesis of RNA whose sequence is antiparallel to the sequence encoding the protein. Such anti-sense sequences have been tested in a number of viral diseases. Alternatively, anti-sense oligodeoxynucleotides can be introduced into target cells; such short sequences are not themselves transcribed, but inhibit transcription and/or subsequent translation of the corresponding sense DNA sequence in the target cell.

Until recently it was widely thought that the minimum sequence length necessary in order to effect anti-sense inhibition of gene expression was 12 to 14 nucleotides (Wagner, 1994). However, it has now been shown that the specificity of binding to the target

sequence can be sufficiently enhanced by use of modified oligonucl otides comprising C-5 propyne pyrimidin s and phosphorothioate internucl otide linkages that sequences as short as 7 or 8 nucleotides are effective in providing gene-selective, mismatched sensitive, ribonuclease H-dependent inhibition, in which flanking sequences of the target RNA are important in determining specificity (Wagner *et al*, 1996).

However, successful use of anti-sense nucleotides to counter expression of a gene *in vivo* is limited by factors such as the need for specific suppression of mutant gene expression (Milan, 1993; McInnes and Bascom, 1992), or the need for high concentrations of the anti-sense nucleotides (Akhtar and Ivinson, 1993).

To date, this form of therapy has largely involved use of anti-sense sequences packaged in liposomes, or direct application of antisense cDNA or oligonucleotides to the site of disease. Thus attempts to increase uptake of anti-sense sequences into the target cell by encapsulating these sequences in liposomes have been largely unsuccessful. It is also difficult to target liposomes efficiently, and uptake is even lower than with viruses.

The targeting may also be achieved by virus-mediated DNA transfer, using viruses such as the Sendai virus. Sendai virus is an RNA virus which has been shown to deliver DNA and proteins into cells with more than 95% efficiency (Kaneda *et al*, 1987). In this gene transfer system, DNA nuclear protein complex in liposomes is directly introduced into the cytoplasm of the cell by the fusion activity of Sendai virus. The DNA is delivered rapidly into the nucleus with nuclear protein. Sendai virus-mediated gene transfer occurs by fusion of the virus with the cell membrane, and bypasses the endocytic pathway. Recently, highly efficient delivery of anti-sense or plasmid DNA into target cells by Sendai virus has been observed. Both the anti-sense and plasmid DNAs retained

their activity not only in culture but also *in vivo* (Kaneda *et al*, 1987). However, the use of this virus is limited by the fact that there are no suitable constructs available at present to use as vectors. In addition, the transferred DNA can only be expressed for a limited period of time since the gene transfer is mediated by fusion.

Retroviruses have been widely used for somatic tissue gene therapy (Boris-Lawrie and Temin, 1993). They can target and infect a wide variety of host cells with high efficiency, and the transgene DNA integrates into the host genome. Theoretically, the integration of the DNA will provide permanent production of the transgene which could result in permanent rescue of the cells. However, retroviruses cannot infect non-dividing cells (Salmons and Günzburg, 1993). Furthermore, the retrovirus particles are unstable *in vivo*, which makes it difficult to achieve high virus titre with inoculation. In addition, there are significant concerns regarding the oncogenicity of the integrated viruses. The inability of retroviruses to infect non-dividing cells means that they cannot be selected as candidates for gene transfer in the eye, as the most important target cells such as photoreceptors and RPE cells are non-dividing cells.

The usefulness of herpes simplex virus vectors has been limited by their poor efficiency of infection (Culver *et al*, 1992). Two types of vectors have been developed, namely the replication defective recombinants and the plasmid-derived amplicons. The latter requires a helper virus. Although the toxic genes can be removed from the herpes simplex virus with difficulty, the constructs remain cytotoxic (Johnson *et al*, 1992). In addition, the long term expression of the sequences inserted has been unsuccessful to date, and there are problems with the regulation and stability of the constructs. The application of modified herpes simplex viruses to the eye in gene therapy poses major concerns because of their pathogenicity. Herpes zoster virus infection causes

serious infections in the eye, frequently resulting in blindness requiring corneal transplantation.

Adenoviruses have been widely used for gene transfer in both non-dividing and proliferating cells. They can accommodate DNA up to 7.5 kb, and provide efficient transfection and high viral titre. The main advantage of using these rather than retroviruses is the ability to infect a wide range of non-dividing target cells (Kozarsky and Wilson, 1993). Replication-defective adenoviruses are considered to be relatively safe, in that these viruses are common pathogens in humans, usually causing relatively benign conditions such as colds. The vectors carry tumour genes with a deletion mutation, lowering the possibility of becoming oncogenic (Siegfried, 1993). In the first experimental gene therapy trial approved by the US National Institutes of Health Recombinant DNA Advisory Committee, recombinant adenoviruses were used to treat individuals suffering from cystic fibrosis.

However, the main disadvantage of adenoviruses is their transient gene expression. This is a result of the lack of integration of the transgene into the cellular genome. Furthermore, few attempts at gene delivery to non-dividing cells have been successful. The first successful gene transfer into the brain, which consists of non-dividing cells, was reported in 1993 using adenoviruses (Le Gal La Salle *et al*, 1993).

These results indicate that gene therapy is a theoretically viable approach in the treatment of diseases, but that the technical difficulties of efficient targeting and uptake need to be overcome by using viruses which adhere to and are taken up by the target cells. This process is inefficient, and the use of viruses may entail an undesirable level of risk of iatrogenic disease. Positive results have, however, been published that teach that regulation of biological processes by gene therapy is feasible.

There is therefore a need for improv d methods of targeting gene therapy for the treatment of disease, and for suitable compositions comprising hyaluronic acid for use in such treatment.

D) **Gene Therapy and Ocular Disease**

In Australian Patent Application No. 75168/94 (Hybridon Inc), it was shown that *in vitro* expression of murine VEGF could be inhibited in COS-1 or NB41 cells by incubation with 19- to 21-mer anti-sense oligonucleotides based on murine VEGF. A 21-mer antisense nucleotide targeted against the translational stop site was shown to be the effective sequence. There is no disclosure or suggestion of specific targeting of sequences to any tissue in the eye, or of treatment of any ocular conditions other than diabetic retinopathy.

In U.S. Patent No. 5,324,654, a method of stimulating proliferation of non-malignant cells is disclosed. The method comprises the *in vitro* treatment of cells with an anti-sense nucleotide corresponding to the retinoblastoma (Rb) gene to inhibit expression of the Rb gene product, resulting in suppression of the expression of proteins which inhibit cell growth. In this way, proliferation of cells is encouraged. The proliferated cells can then be re-implanted if desired, and the cells may be genetically engineered to replace a specific gene prior to re-implantation. However, there is no reference to use of this anti-sense sequence to treat conditions of the eye. The invention of US-5324654 is directed to establishing cell lines capable of long-term proliferation and to treatment of conditions such as muscular dystrophy and diabetes, caused by failure to express a gene.

The targeting of a specific gene to a specific cell has not been attempted, and no one ocular type has been singled out. Specific targeting using adenovirus alone is expected to be difficult, as the virus has the ability to transfect a large variety of cell types.

For treatment of ocular diseases, in which other sites in the body are largely or entirely unaffected, it is highly desirable to deliver the therapeutic agent selectively to the target tissue in the eye. For anti-sense DNA, it is essential that the DNA be actually taken into these target cells.

The advances in gene therapy referred to above have led to further studies of the delivery and expression of transgenes into target cells, such as the β-galactosidase transgene into the retina (Bennett *et al*, 1994, Li *et al*, 1994 and Mashmour *et al*, 1994) using recombinant adenovirus as a delivery system. The retinal pigment epithelium (RPE) is a non-renewable single cell layer in the eye, situated between the neural retina and the choroid. The cells of the RPE are phagocytic neuroepithelial cells which form the outer most layer of the retina. The phagocytic properties of these cells have long been known, and have been reviewed (Bok and Young, 1979). High levels of transgene expression within 3 days in the RPE layer and within two weeks in the photoreceptor cells of the neural retina in young animals were observed. The expression of the reporter gene was followed up to 9 weeks. In older animals, neither subretinal nor intravitreal injections induced the expression of the β-galactosidase transgene in the photoreceptor cells (Li *et al*, 1994).

Australian Patent Application No. 61444/94 shows that replication-defective recombinant adenovirus is taken up by various tissues in the eye following injection into the anterior chamber, the vitreous humour, or the retrobulbar space, and that the reporter gene β-galactosidase is expressed. However, this document does not show that such forms of viruses successfully incorporate the active agent into the target cell or area. Nor is there any disclosure or suggestion that VEGF can be used to heal any ocular condition.

One specific obstacle to success of using anti-sense nucl otides as a form of therapy for the eye is the inability of the nucleotide to enter the target cells, and the limited stability of the oligonucleotides which have been modified, eg. phosphorothioate oligonucleotides (Helene 1991). These factors greatly restrict the success of gene therapy *in vivo*, particularly in the long term. In the treatment of retinal diseases, the ability to delay progression of the conditions by about 12 months would greatly increase the value and effectiveness of long term therapy.

Cytotoxicity has been observed in association with use of adenoviruses as a transport vector for retinal gene therapy. This cytotoxicity has been shown to be dose-dependent (Mashmour, 1994) and poses another difficulty in using such a vector. In order to decrease the dose of a given vector but retain its transfer efficiency, an adjuvant may be used. Adjuvants such as lipofectin have been shown to increase the uptake of "naked" DNA by cells.

Even though HA has been widely used in eye surgery as a replacement for vitreous humour lost during the surgical procedure, we are not aware of any suggestion in the art that HA promotes uptake of any pharmaceutical agent into any cells or tissues in the eye. Similarly, although HA has been suggested to promote penetration of pharmaceutical agents such as antibiotics or anti-cancer agents, as set out in Australian Patent Application No. 52274/93 by Norpharmco, this specification does not suggest that HA promotes uptake of any agent, let alone DNA or viruses, by *individual* cells of any type. In particular, this specification does not teach the use of HA via intra-ocular injection.

We have now found that the phagocytic nature of the RPE cells will increase the uptake of molecules such as oligonucleotides and viruses, following injection into the vitreous space *in vivo*. These RPE cells show increased uptake of virus compared to other cell types. Our findings

enable the induction of both long-term and short-term inhibition of VEGF expression in retinal or choroid epithelial cells, and henc inhibition of neovascularisation of the retina or the development of SRNVM.

SUMMARY OF THE INVENTION

According to one aspect, the invention provides a composition comprising a nucleic acid and a hyaluronic acid or a derivative thereof, together with a pharmaceutically-acceptable carrier.

The nucleic acid may be a DNA or RNA, and/or may be a nucleotide sequence which is in the anti-sense orientation to a target sequence. The target sequence is a nucleic acid sequence which is implicated in the causation or exacerbation of a pathological condition. This target nucleic acid sequence may be a genomic DNA, a cDNA, a messenger RNA or an oligonucleotide. Where the target nucleic acid sequence is a genomic DNA, it may be present in a coding region, or in a regulatory region, such as a promoter sequence.

Alternatively, the nucleic acid may be present in a vector comprising a nucleic acid sequence to be transferred into a target cell. Again the nucleic acid sequence may be genomic DNA, cDNA, messenger RNA, or an oligonucleotide. However, in this case the nucleic acid may either be a sense sequence to be provided to a target cell in order to exert a function, or may be an anti-sense sequence to be provided to inhibit the functioning of a nucleic acid present in the target cell.

The vector comprising the DNA to be transferred may be a virus, such as an adenovirus, an adeno-associated virus, a herpes virus or a retrovirus. The use of all of these classes of virus as vectors for gene therapy has been extensively canvassed in the art. Alternatively the vector may be a liposome.

The invention also provides a method of treatment of a pathological condition in a subject in need of such treatment, comprising the step of administering an effective dose of a composition according to the invention to said subject.

It will be clearly understood that the dose and route of administration will depend upon the condition to be treated, and the attending physician or veterinarian will readily be able to determine suitable doses and routes. It is contemplated that the compositions of the invention may be administered parenterally, for example by intravenous or subcutaneous injection, topically, for example adsorbed on gels or sponges, or directly into the tissue to be treated, for example by intra-ocular or intra-tumoral injection.

The subject to be treated may be a human, or may be an animal, particularly domestic or companion mammals such as cattle, horse, sheep, goats, cats and dogs.

In the compositions of the invention the nucleic acid or vector may simply be mixed with the hyaluronic acid, or may optionally be physically or chemically coupled to hyaluronic acid. Methods for attaching DNA to hyaluronic acid have been disclosed in "Synthesis of Sulfonated Hyaluronan Derivatives containing Nucleic Acid Bases, Chemistry Letters, 1994 2027-2030 and "Transport Performance of Nucleosides Through Nucleic Acid Bases Conjugated to Hyaluronan"; Chirachanchai, S., Wada, T., Inaki, Y. and Takemoto, K, Chemistry Letters. 1995 2 121-122.

In a preferred embodiment this aspect of the invention provides compositions and methods for treatment of a retinal disease mediated by abnormal vascularization, in which the nucleic acid is an anti-sense nucleic acid sequence corresponding to at least a part of the sequence encoding vascular endothelial growth factor (VEGF), and is administered together with a hyaluronic acid as described below.

Many forms of HA are suitable for use for the purposes of the invention. In particular, both low and high molecular weight forms of HA may be used. The only requirement is that the HA be of a degree of purity and sterility to be suitable for pharmaceutical use; preferably the HA is also pyrogen-free. High molecular weight preparation of HA may require dilution prior to use. In particular, commercially-available HA products suitable for use in the invention are those supplied by Hyal Pharmaceutical Corporation, Mississauga, which is a 2% solution of HA having a mean average molecular weight of about 225,000; sodium haluronate produced by Life Core™ Biomedical, Inc.; Pro Visc (Alcon Laboratories); and "HEALON" (Pharmacia AB, Üppsala). It will be clearly understood that for the purposes of this specification, the term derivatives of HA encompasses homologues, analogues, complexes, esters and fragments and sub-units of HA.

Derivatives of HA which may be used in the invention include pharmaceutically-acceptable salts thereof, or fragments or subunits of HA. The person skilled in the art will readily be able to determine whether a given preparation of HA, or a particular derivative, complex *etc.* of HA, is suitable for use in the invention.

According to a second aspect, the invention relates to a composition for treatment of a retinal disease mediated by abnormal vascularisation, comprising an anti-sense nucleic acid sequence corresponding to at least a part of the sequence encoding vascular endothelial growth factor (VEGF), and optionally further comprising one or more adjuvants such as hyaluronic acid or a dendrimer compound for increasing cellular uptake, together with a pharmaceutically acceptable carrier. The use of dendrimer compounds to transport genetic material into target cells is disclos d in International Patent Application No. WO 95/24221 by Dendritech Inc *et al.*

The VEGF is most preferably human retinal pigment epithelial (RPE) or choroidal endothelial VEGF.

In separate embodiments, this aspect of the invention is directed to treatment for such retinal disease in the short term (up to about two months), the long-term (up to about one year), and indefinitely (for the life of the patient). In the first embodiment, for short-term treatment the invention provides one or more anti-sense oligonucleotides having 100% complementarity to a corresponding region of the VEGF gene. The oligonucleotide should have 16 to 50 nucleotides, preferably 16 to 22, and more preferably 16 to 19 nucleotides. Modified oligonucleotides of the kind described by Wagner *et al* (1996) may be used, and enable the lower limit of sequence length to be reduced to 7 nucleotides.

For long-term inhibition, the invention provides a recombinant virus comprising VEGF DNA in the anti-sense direction. This VEGF DNA is a long sequence, which for the purposes of this specification is to be understood to represent a VEGF sequence of greater than 20 nucleotides in length, preferably greater than 50 nucleotides, ranging up to the full length sequence of VEGF. In this embodiment, the recombinant virus is accumulated in RPE cells, and produces anti-sense VEGF *in situ*, thereby inhibiting VEGF expression in the RPE cell.

For indefinite inhibition, the invention provides a virus comprising VEGF DNA in the anti-sense direction in which the virus is one capable of integrating the anti-sense sequence into the genome of the target cell. Preferably the virus is an adeno-associated or similar virus. As in the embodiment directed to long-term treatment, this VEGF DNA is of at least 20 nucleotides, preferably greater than 50 nucleotides. The adeno-associated or similar virus facilitates integration of anti-sense VEGF DNA into the RPE cell genome, thus enabling expression of anti-sense VEGF for as long as the cell remains functional.

Eye diseases which may be treated using the compositions and methods of th invention include, but are not limited to, age-related macular degeneration (ARMD) and diabetic retinopathy. Other ocular conditions and tissues in which neovascularisation occurs, for example branch or central retinal vein occlusion, retinopathy of prematurity (also known as retrolental fibroplasia), rubeosis iridis or corneal neovascularisation, may also be treated by the invention.

In another aspect, the invention provides a method of prevention or amelioration of a retinal disease mediated by abnormal neovascularisation, comprising the step of administering an effective amount of an anti-sense nucleic acid sequence directed against VEGF into the eye, thereby to inhibit neovascularisation.

The anti-sense sequence may be carried in a replication-defective recombinant virus, as a vector or vehicle. The vector preferably comprises replication-defective adenovirus carrying promoters such as the respiratory syncytial virus (RSV), cytomegalovirus (CMV), adenovirus major late protein (MLP), VA1 pol III or β-actin promoters. The vector may also comprise a polyadenylation signal sequence such as the SV40 signal sequence. In a particularly preferred embodiment, the vector is pAd.RSV, pAd.MLP, or pAd.VA1. In a more particularly preferred embodiment the vector is Ad.RSV.aVEGF or Ad.VA1.aVEGF.

In a preferred embodiment, human VEGF is subcloned into the vector, in order to create the restriction sites necessary for insertion, to form an adenovirus plasmid carrying VEGF or partial sequences thereof in an anti-sense direction, which can then be linearized by restriction enzyme digestion. The lineariz d plasmid can then be co-transfected with a linearized replication defective adenovirus, in a suitable permissive host cell such as the kidney 293 cell line.

The compositions of the invention may be delivered into the eye by intra-vitreal or sub-retinal

injection, preferably in an appropriate vehicle or carrier. Such methods of administration and vehicles or carri rs for such injection are known in the art. Alternatively, *ex vivo* delivery of the compositions of the invention may be achieved by removal of RPE cells from the patient to be treated, culturing the cells and subjecting them to infection *in vitro* with a replication-defective adenovirus or an adeno-associated virus as defined above. RPE cells carrying the virus are then injected into the sub-retinal layer of the eye of the patient.

While the invention is specifically described with reference to conditions of the eye, the person skilled in the art will be aware that there are many other pathological conditions in which VEGF is of importance. Such a person will understand that the antisense oligonucleotides and the recombinant viruses of the invention are applicable to treatment of such other conditions. Similarly the skilled person will understand that while the invention is specifically illustrated with reference to VEGF the methods described herein are applicable to use with other proteins.

BRIEF DESCRIPTION OF THE FIGURES

Figure 1a shows the results of GeneScan analysis of persistence of anti-sense oligonucleotides *in vivo* in the retina following a single intra-vitreal injection.

Figure 1b shows a confocal microscopic image of the retina of a RCS-rdy$^+$ rat at different times following injection of CATSCF.

Figure 2 is a graphical representation of the number of phagosomes in the RPE layers of Long-Evans rats. Doses were as follows: Low 6.6 μg, medium 66 μg and high 132 μg of CATSC anti-sense oligonucleotide. Each column shows the mean and standard deviation of the number of phagosomes in five randomly selected areas in the rat retinas.

Figure 3 is a graphical representation of the number of phagosomes in the RPE layers of RCS-rdy+ rats. Experimental animals were injected with 66 µg of sense oligonucleotides (S1) and 66 µg of antisense oligonucleotide (CATSC).

Figure 4 shows the effect of increasing the titre of adenoviral vector on the number of cells expressing the adenoviral transgene. In all cases, the incubation period was 16 hours. RPE7 denotes Human retinal pigment epithelial cells from a 7 year old donor; F2000C denotes F2000 fibroblastic cells. The C suffix on the F2000 key indicates that the counts for the F2000 cell expression have been corrected for direct comparison with the RPE7 cells.

Figure 5 shows the effect of increasing the time of incubation with the adenoviral vector on the number of cells expressing the adenoviral transgene. In all cases, the concentration of the adenoviral vector was 2×10^6 p.f.u./ml. The C suffix on the F2000 key indicates that the counts for the F2000 cell expression have been corrected for direct comparison with the RPE7 cells.

Figure 6 is a graphical representation of the effect of Hyaluronic Acid (HA) on the number of RPE7 cells expressing an adenoviral transgene for a fixed viral titre. The three bars indicate the effect of 0.001% HA, 0.005% HA and no HA (control). The error bar indicates one standard deviation.

Figure 7 is a graphical representation of the effect of Hyaluronic Acid (HA) on the number of F2000 cells expressing an adenoviral transgene for a fixed viral titre. The three bars indicate the effect of 0.001%HA, 0.005%HA and no HA (control). The error bar indicates one standard deviation.

Figure 8 shows the immunofluorescent staining of HA receptors in RPE7 and F2000 fibroblasts 8a. CD44 staining on RPE7; 8b. ICAM staining on RPE7; 8c. RHAMM staining on RPE7; 8d. CD44 staining on F2000 fibroblasts;

8e. ICAM staining on F2000 fibroblasts; 8f. RHAMM staining on F2000 fibroblasts.

Figure 9 shows micrographs of choriocapillary endothelial cells isolated from porcine eye, illustrating their characteristic appearance (top panel), presence of Factor VIII-related antigen (middle panel), and ability to take up acetylated low-density lipoprotein into the cytoplasm (bottom panel).

Figure 10 shows the effects of a variety of hyaluronic acid preparations on tube formation by choriocapillary endothelial cells.

Figure 11 shows the alkaline phosphatase staining of CD44 antigen in retinal pigment epithelium cells. In each case the epithelium is at the bottom of the picture with choroid above.

A. Unbleached pigment epithelium layer

B. Pigment epithelium layer bleached to remove melanin granules.

C. Bleached pigment epithelium stained with alkaline phosphatase-labelled anti-CD44 antibody.

Figure 12 shows the results of DNA PCR and RT-PCR analysis of transfection of a retinal pigment epithelial cell line with $VEGF_{165}$.

Figure 13 shows the effect of $VEGF_{165}$ produced by transfected RPE cells on tube formation by choriocapillary endothelial cells.

DETAILED DESCRIPTION OF THE INVENTION

The invention will now be described by way of reference only to the following non-limiting examples. In some of these examples, the feasibility of the methods utilised in the invention is demonstrated using anti-sense oligonucleotides complementary to cathepsin S (CATSC).

Example 1 Accumulation of Antisense Oligonucleotides in the RPE Cell Layer

Human retinal pigment epithelial cells were cultured and on the third passage were used for *in vitro* experiments. Confluent cultures were incubated with bovine rod outer segments (ROS) to mimic the *in vivo* situation. A fluorescein-labelled anti-sense oligonucleotide complementary to human cathepsin S (CATSCF) was added to the medium of these cells and after 7 days of incubation, the cells were harvested. The presence of fluorescein-labelled oligonucleotides within the RPE cells was detected by fluorocytometry (FACS). A GeneScan DNA analyser was used to assess the presence and stability of the oligonucleotides in the cells. The fluorescence of cultured RPE cells was increased by about 100-fold, demonstrating the presence of the anti-sense oligonucleotides within the RPE cells. These results are summarised in Table 1.

Table 1

Fluorocytometer measurements of human RPE cells incubated with or without complementary CATSCF

SAMPLE	FACS READINGS
RPE + ROS	5.94
RPE + ROS + CATSC	8.50
RPE + ROS + CATSCF	461.50

It was not known if the fluorescence was emitted by the full length CATSC or by degraded oligonucleotides. Using GeneScan, it was demonstrated that the fluorescence was largely due to a 19-mer oligonucleotide, which appeared at a position similar to that of CATSCF. Using a similar procedure, it was observed that CATSC oligonucleotides were still intact after 7 days of incubation.

Example 2 Cellular Distribution of Oligonucleotides in Retinal Cells and Stability of Oligonucleotides Following Injection Into Eyes

One nmole of CATSCF was injected into the vitreous humour of 6-week old non-pigmented RCS-rdy$^+$ rats, and the movement of the oligonucleotides were followed by confocal fluoromicroscopy. Fluorescein (1 nmole) was also injected as a control. Animals were euthanised 2 hours, 3 days and 7, 14 and 28 and 56 days after injection. Following euthanasia, the injected eyes were enucleated, frozen, sectioned and immediately used for confocal microscopy without fixation.

Two hours after intravitreal injection of CATSCF the penetration of the oligonucleotides were observed in the ganglion cell layer at 2 hours and also in the photoreceptor and pigment epithelial layers at 3 days. However, 7 days following injection, only the RPE layer had significant amounts of CATSCF. At 14, 28 and 56 days, a fluorescent signal was maintained in the RPE layer, and no signal was observed in any other cell types. These results show that a large proportion of CATSCF was taken up by the phagocytic RPE cells.

Following intravitreal injection as described above, eyes were dissected, the retina was removed, and the DNA extracted. The purified DNA was subjected to GeneScan analysis. The presence of undegraded fluorescein-labelled oligonucleotide was demonstrated in the rat retinas after 7, 14, 28 and 56 days of injection, as shown in Figure 1a. The intensity of the signal had significantly diminished by 56 days.

Confocal microscopic analysis was performed following a single injection of 10 nmol CATSCF into non-pigmented RCS-rdy$^+$ rats. Retinas were examined at intervals after injection, and the results are shown in Figure 1b, in which g represents the ganglion cell layer, i the inner nuclear layer, o the outer nuclear layer, and r

the retinal pigment epithelial layer. The panels show retinas 2 hours (B), 3 days (A), 7 days (C), 28 days (D) and 56 days (E) after injection of 10 nmol CATSCF, and 3 days (F) after injection of FITC as a control.

These results demonstrate that following intravitreal injection, oligonucleotides accumulate in the RPE cells. The oligonucleotides are present in the RPE layer up to 56 days, and remain in a biologically active form during this period of time.

Example 3 Biological Activity of Anti-Sense Oligonucleotides

Female sixty day-old pigmented rats of the Long-Evans strain were obtained from Charles River Breeding Laboratories, Wilmington, MA.

Sixty day old non-pigmented RCS-rdy$^+$ rats were obtained from our colony. The animals were acclimatised to a 12 hr light/ 12 hr dark lighting cycle, with an average illuminance of 5 lux for at least 10 days prior to experimentation.

Animals were anaesthetised by intraperitoneal injection of sodium pentobarbital (50 mg/kg body weight). Intravitreal injections through the pars plana were made using a 32 gauge needle. The left eyes served as controls, and the right eyes were injected with 3µl of 150 mM sodium chloride (saline), or with 3 µl of saline containing 6.6, 66 or 132 µg of CATSC respectively, an anti-sense oligonucleotide described earlier (Rakoczy *et al*, 1994) or 66 µg of sense oligonucleotide S1, 100% complementary to CATSC. Injected animals were allowed to recover from anaesthesia, and at one week post-injection were sacrificed by an overdose of sodium pentobarbital and used for morphological examination. All animals were killed within half an hour at the same time of the day, approximately 4 hours after light onset. Two to three animals were used for each dose.

Following enucleation, whole eyes were immersed in 2.5% glutaraldehyde and 1% paraformaldehyde in 0.125M sodium cacodylate buffer, pH 7.35. The cornea and lens were dissected free and the eyecup trimmed for orientation purposes. The tissue was fixed overnight at 4°C and then post-fixed for 1 hour in 1% osmium tetroxide at room temperature. After ethanol dehydration, the tissue was embedded in epoxy resin. Retinal sections were prepared for transmission electron microscopy as described previously (Kennedy *et al*, 1994).

Histological data were obtained by light microscopy. Semi-thin 1 μm sections were cut using a LKB 2088 Ultratome (LKB-Produkter, Sweden) with a diamond knife and stained with toluidine blue. The number of phagosomes that accumulated in the RPE cells of each specimen injected with saline, low (6.6 μg), medium (66 μg) or high 132 μg) dose of CATSC and 66 μg of S1 sense oligonucleotide was determined. From each eye, five sets of counts were made at 40 fold magnification and the standard deviation was calculated. Each set consisted of the total number of phagosomes in 250 μm length of RPE from 6 different randomly selected areas. The number of phagosomes that accumulated in the RPE of the control eyes, low medium and high doses of CATSC were analysed and graphically represented. Comparisons were made using the analysis of variance following the general linear models procedure of the SAS^R (version 6) statistical package (SAS Institute Inc., USA).

The results show that we successfully tested an anti-sense oligonucleotide (CATSC) in two strains of rats. The number of phagosome-like inclusion bodies present in control Long-Evans and RCS rdy + rats was not significantly different, 35.8+11.6 and 47.29+14.8 (mean ± SD), respectively, The intravitreal injection was non-traumatic. Light microscopic examination of the retinas of the saline injected eyes revealed no damage to the outer layers of the retina, and there was no increase in the

number of phagosome-like inclusion bodies in the RPE layer when compared to the control non-injected animals. Long-Evans rats were used to identify the minimum amount of CATSC required to induce biological changes in the RPE layer. In the control eyes and in those injected with low dose (6.6 μg) of CATSC, the number of phagosome-like inclusions within the RPE cells were 35.8+11.6 and 35.0+7.4 respectively. In animals injected with higher doses (66μg and 132 μg), the number of phagosome-like inclusions were 96.2+13.6 and 141.0+34.7, respectively, and the difference was statistically significant when compared to the control and low dose samples (Figure 2).

RCS-rdy+ rats injected with 66 μg of CATSC also demonstrated a statistically significant increase in the number of phagosome-like inclusion bodies, ie 204.20+39.3 when compared to the 47.20+14.8 in controls. In contrast, the injection of 66 μg of sense oligonucleotide (S1) did not increase the number of phagosomes (Figure 3) present in the RPE Layer, (34.4+12.54).

The inclusions found in RPEs of CATSC-injected Long-Evans and RCS-rdy+ animals were spherical in shape, and clearly distinguishable from the very dark, small elliptical melanin granules present in Long Evans rats. In the presence of 66 μg of CATSC, the tips of the outer segments showed signs of disorganisation and there were some vacuoles present in the outer nuclear layer. However these changes were not observed in S1 sense oligonucleotide-injected animals.

Electron microscopic examination of the RPE layer of a CAT SC-injected eye revealed no significant changes in the morphology of RPE cells. Melanin granules appeared smaller and less concentrated due to regional differences. Individual mitochondrial profiles were smaller in the treated group than in the controls, although the number was greater in the treated than in the untreated animals. Electron microscopic examination confirmed that the structures of the undigested material was similar to that

of phagosomes. The numerous phagosomes seen in the RPE layer of rats treated with CATSC were paranuclear, and contained mainly compacted phospholipid membranes, resembling undigested photoreceptor outer segment (POS) and confirming their photoreceptor origin. There were no other morphological changes observed in the POS layer, except for the disorganised appearance of the apices in treated animals.

Example 4 Gene Transfer to the RPE Cell Layer

The nature and dynamics of gene transfer using an adenoviral vector were examined. The effects of adjuvants on the uptake of the adenovirus was also studied.

Human RPE cultures (HRPE7) were obtained from a 7-year old Caucasian donor and prepared as described in Rakoczy *et al* (1992). Human F2000 fibroblast cells were cultured, harvested and pooled in Minimal Eagles Medium (MEM, Multicel ™ Trace Biosciences, Australia), with 10% FBS (Multiser™, Trace Biosciences) and containing 125µl gentamicin (Delta West, Bentley, Australia) per 100 ml medium. One ml aliquots of the pooled cell suspension were placed into each well of a 24 well plate, to ensure equal seeding of wells. Experiments were carried out with cells at confluence, and at least two parallel sets of each experimental points were obtained.

Expression of Adenoviral Transgene

Replication-deficient Adenovirus 5 carrying a RSV promoter and β-Galactosidase gene (Ad.RSV.βgal) (Stratford-Perricaudet, 1992) was cultured and purified as described by Graham and Prevac, 1991. Ad.RSV.βgal was added to each well as a 1 ml aliquot, in MEM, at a concentration of $4x10^6$ p.f.u./ml. for the time-based trials, giving a final concentration of $2x10^6$ p.f.u./ml. For the titre-based trials, concentrations of $8x10^3$, $4x10^4$, $8x10^4$, $2.4x10^5$, $4x10^5$ p.f.u./ml were added to the wells in a 1 ml aliquot, making the total volume 2 ml in each well

(the final viral concentration is half of that added). All of the trials examining the effect of increasing viral titres involved incubation of the culture with the viral suspension for a fixed period of 16 hours.

Experiments were terminated by removing the medium from each well and fixing the cells with 0.5 ml of 0.5% glutaraldehyde. The glutaraldehyde was removed after 5 minutes and the cells washed once with Phosphate Buffered Saline (PBS). Following this, 0.5 ml of X-gal stain [For 1 ml of solution (concentration in final solution): 25µl X-Gal (0.5mg/ml, BioRad, Hercules, California), 44µl HEPES buffer (44mM), 100µl $K_4Fe(CN)_6$(3mM) 100µl $K_3Fe(CN)_6$(3mM, 100µl NaCl(15mM), 100µl $MgCl_2$(1.3mM), sterile distilled water to make 1 ml (531µl)] was added to each well and incubated overnight (about 16 hours) at room temperature.

Cell Counting

An Olympus TO41 phase contrast microscope (Olympus Optical Co Ltd, Tokyo, Japan) at a magnification of 200x was used. Counting was carried out by a single observer. A second observer then blind counted 25% of the samples as a countercheck. A counting graticule in the microscope was used to define the region for counting when averaging was used.

All cells staining positively with the X-Gal stain were counted. At low expression of transgene (< approximately 2000 cells/well), the entire plate was counted. When the cell count was higher, averaging was used. Cells were counted in five standardized regions and their average was used to calculate the total count for each well.

In the trials comparing the rate of expression in HRPE7 and F2000 fibroblasts, the figure for the number of F2000 cells expressing the gene was corrected. This correction reflects the different total cell number of each cell type in a confluent culture in a 24 well plate. The count for HRPE7 is $3x10^5$ per well and for F2000, it is

$2x10^5$ per well. The graphical figures (Figures 4 and 5) also contain corrected counts to allow direct comparison. Where there is no comparison between cell types, no alteration of the raw count is carried out.

In the titre-based trials, the profiles of expression were markedly different in terms of rate of increase and absolute expression. For HRPE7 cells, the expression rate appeared to have an exponential form, while in F2000 fibroblasts the profile was more linear. There was a widening gap in expression throughout the trial comparing titre. At higher viral titre, HRPE7 expression was an order of magnitude greater than F2000 cells. For the conditions and titres tried in this experiment there was an overall and constant increase in the number of cells expressing with increasing vector titre (Figure 4).

In the study of the effect of incubation time on the profile of transgene expression, the concentration of AdV.RSV.βgal was kept constant at $2x10^6$ p.f.u./ml. The profiles of expression of transgene in the two cell types were markedly different, both in terms of rate of increase and magnitude of number of cells expressing the gene. There was also a notable delay between the sharp increase in number of HRPE7 and F2000 fibroblasts expressing the gene. For HRPE7 cells, the upturn in expression rate occurred at 4 hours while in F2000 fibroblasts, it occurred at 24 hours. There is a "window" period between 4 and 24 hours where the HRPE7 expression is an order of magnitude greater than that of F2000 cells (Figure 5).

Example 5 Effect of HA as an Adjuvant on the Uptake and expression of the β-gal Gene using a Viral Vector

HRPE7 and F2000 cells were aliquoted into 24 well plates. The cells were incubated as described in Example 4, and allowed to reach 95% of confluence. Solutions of 0.001% to 0.005% buffered sodium hyaluronate (HA) (1% Hyaluronic acid from rooster comb; HEALON,

Pharmacia AB, Uppsala, Sweden) were prepared with MEM. A dose of 10 µl of viral solution at a concentration of 4×10^6 p.f.u. was added to 10 ml of each of the diluted HA solutions and 10 ml of MEM for the control, and incubated for 30 minutes at 25°C with intermittent gentle shaking. To separate wells of the 24 well plate, 1 ml of each of the test and control solutions was added. There were four parallel samples for each test concentration and for the control, which were counted and averaged.

The viral/HA solutions were incubated with the cell cultures for 16 hours. Each experiment was terminated according to the procedure given in Example 4.

Table 2

Experiment 1: Expression in HRPE 7 Cells

	1	2	3	4	Mean
RPE 7/HA (0.001%)	17114	20776	18730	17998	19168
RPE7/HA (0.005%)	17688	22186	20258	22236	20592
RPE 7/Cont	10782	15480	16326	15266	14705

The mean number of HRPE7 cells expressing the transgene in each well for adenovirus alone was 14 705 (SD±2228). For adenovirus with 0.001% HA the mean number of expressing cells was 19 168 per well (SD 1561) and for 0.005% HA the mean was 20592 (SD 2143) (Figure 6). This shows an increase in number of cells expressing the transgene of 30.4% for 0.001% HA and of 40.0% with 0.005% HA.

As assessed by Student's t test, the probability of the significance of the increase in number of HRPE7 cells expressing the gene, when 0.005% HA is used, compared with the control, is 0.0097, which shows a 1 vel of significance of $p<0.01$. The significance reflects the

large difference between the means (20592 (test) v 14705 (control)) and the separation of the m ans by more than two standard deviations.

The t test probability of the significance of the increase in number of RPE7 cells expressing the gene, when 0.001% HA is used compared with the control, is 0.02931, which shows a level of significance of $p<0.05$. The reduced significance reflects the smaller difference between the means (19168 (test) v 14705 (control)).

Table 3

Experiment 2: Expression in F2000 Cells.

	1	2	3	4	Mean
F 2000/HA (0.001%)	4358	4620	4195	NA	4391
F 2000/HA (0.005%)	4506	3914	4759	4332	4378
F2000 Cont	3844	3652	3875	3748	3780

The protocols for examining the effect of HA on the expression of a transgene in F2000 fibroblasts were the same as that for HRPE7. The numbers of cells expressing transgenes were significantly less than for HRPE7, which is consistent with the results demonstrated in Example 4. The mean number of cells expressing in each well for adenovirus alone was 3780 (SD±100). For adenovirus with 0.001% HA, the mean number of expressing cells was 4391 per well (SD±214) and for 0.005% HA the mean was 4378 (SD355)(Fig. 7.). This shows an increase of 15.8% for 0.001% HA and of 15.5% with 0.005% HA in the number of cells expressing the adenoviral transgene.

The two-tailed Student's *t* test was used to assess the significance of the difference between the means for each set of experimental data. For each experiment, the means, the Standard error of the differences of the

means and the p value for the t test are given. In both experiments, HA gave very significantly increased uptake ($p < 0.05$).

The t test probability of the significance of the increase in number of cells expressing transgene for the F2000 fibroblasts with 0.005% HA, compared with the control, is 0.0044, which shows a level of significance of $p<0.01$. The high significance here reflects the large difference between the means (4391(test) v 3790(control)) and the small variation within the two samples. The standard deviation is 214(test) and 111(control).

The t test probability of the significance of the increase in number of cells expressing transgene for the F2000 fibroblasts with 0.001% HA, compared with the control, is 0.0195, which shows a level of significance of $p<0.05$. There is a greater variation in the raw figures, and the standard deviation is higher than for the 0.005% sample (355 v 214), which accounts for the higher p value.

Preliminary trials of chondroitin sulphate and lipofectamine as adjuvants were also carried out in order to assess the likely efficacy. These agents had no significant effect on gene expression in HRPE7 cells.

The following doses of adjuvants were also used:-

Table 4

HA Concentration

Amount of viral solution	0.05%	0.01%	0.005%	0.001%	Control	Control
5 µl	176[a]	318	319	316	279	282
10 µl	305[a]	906	802	645	623	609
25 µl	-[a]	714[b]	1682	1822	1478	1184
50 µl	-[a]	2772	2692	3328	2250	1822

The figures represent the effect of HA concentration on the uptake and expression of β-gal transgene. Increasing virus concentration resulted in an

increase in the number of β-gal expressing cells. The numbers represent the number of RPE cells staining positive for β-gal following 16 hours incubation of virus in the presence of HA in a 24 well plate (cc 2x10" pfu/ml).

[a] The viscosity of these solutions precluded adequate dispersion of the HA and made them very difficult to manipulate.

[b] It was not clear why this figure fell so far outside of the normal distribution of the other results.

Example 6 Effect of HA Molecular Weight on the Uptake and Expression of the βgal Gene Using a Viral Vector

Adenovirus with a β-galactosidase marker gene and a RSV promoter (AdV.RSV.βgal) was cultured in cells of the K293 embryonic human kidney cell line. Supernatant was collected, and the concentration of virus was determined by serial dilution with 4 replicates of each dilution. The concentration of the virus was calculated to be 5×10^8 pfu/ml. The virus was suspended in MEM medium with 10% fetal bovine serum (FBS) and 125µl/100ml gentamicin.

Human Retinal Pigment Epithelial Cells (HRPE) were from a 20 year old donor and cultured in medium as described above. They were aliquoted into 24 well plates from the same stock and allowed to reach confluence. Fourth passage cells were used.

The following HA preparations were tested:

1. Hyal (MW approx. 300 000)
2. Provisc (MW approx. 1 900 000)
3. Healon GV (MW approx. 5 000 000)

Each of the preparations was diluted to a solution of 0.002% in MEM without FBS.

The virus solution as above was mixed in a 1:1 ratio with the adjuvant solution giving a final viral concentration of 2.5×10^8pfu and an HA concentration of 0.001%. The two solutions were incubated in this mixture

for 30 minut s at room temperature with gentle shaking. The control solution consisted of a mixture of the virus with MEM without FBS with no HA present.

To each of the 24 well cells 1 ml of the viral/HA mixture was added. Incubation was for 24 hours in a CO_2 incubator (5% CO_2) at 37°C. The experiment was terminated by removing the viral/HA mixture and adding 0.5ml of 0.5% glutaraldehyde for 5 minutes to each well. The well was washed once with PBS and reacted with X gal stain.

An Olympus TO41 phase contrast microscope (Olympus Optical Co. Ltd. Tokyo, Japan) at a magnification of 100X was used throughout. Counting was carried out by a single observer and checked against a second blind observer who counted a quarter of the samples. A counting graticule in the microscope was used to define the region for counting. All cells staining positively blue with the X-gal stain were counted as positive. Cells were counted in five standardized regions and their average was used to calculate the total count for each well. The results and statistical analysis are presented in Tables 5 to 9.

Table 5

(count is of sample only)	*Control*	*Hyal*	*Provisc*	*Healon GV*
Number of cells expression β-gal	2043	2486	2424	2756

Statistics

Anova: Single Factor Between all groups

Table 6

SUMMARY

Groups	*Count*	*Sum*	*Average*	*Variance*
Control	3	6129	2043	15769
Hyal	3	7458	2486	4225
Provisc	3	7271	2423.667	36677.33
Healon GV	3	8268	2756	36928

Table 7

ANOVA

Source of Variation	*SS*	*df*	*MS*	*F*
Between Group	777567.0	3	259189	11.07653
Within Groups	187198.7	8	23399.83	
Total	964765.7	**11**		

Anova: Single Factor Between Adjuvants

Table 8

SUMMARY

Groups	*Count*	*Sum*	*Average*	*Variance*
Hyal	3	7458	2486	4225
Provisc	3	7271	2423.667	36677.33
Healon GV	3	8268	2756	36928

Table 9

ANOVA

Source of Variation	*SS*	*df*	*MS*	*F*	*P-value*	F_{crit}
Between Groups	187230.9	2	93615.44	3.61	0.094	5.14
Within Groups	155660.7	6	25943.44			
Total	342891.6	8				

There was an increase in transgene expression in all of the HA-containing samples relative to the control ($P < 0.003$). The percentage increase was 21.7%, 18.6% and 34.8% for Hyal, Provisc and Healon GV HA preparation respectively. There is no significant difference between the effect of different molecular weights of hyaluronic acid ($p = 0.09$).

These results demonstrate that hyaluronic acid increases viral vector uptake, demonstrating an adjuvant effect. In addition it was shown that the adjuvant effect is independent of the molecular weight of hyaluronic acid between MW 300 000-5, 000 000.

Example 7 Demonstration of HA Receptors on the cell membrane of HRPE7 and F2000.

Polyclonal RHAMM (Receptor for Hyaluronan Mediated Motility) antibodies were kindly provided by Dr E Turley, Manitoba Institute of Cell Biology, Canada. The antibody was used at a dilution of 1:75. Monoclonal InterCellular Adhesion Molecule 1 (ICAM-1) antibodies (Boehringer-Mannheim) were used at a concentration of 4μg/ml and monoclonal homing receptor CD44 antibody (CD44) was used at a concentration of 4μg/ml (Boehringer Mannheim Biochemica, Germany). Monoclonal anti-human IgG antibody and rat non-immune serum were kindly provided by Dr M Baines, Lions Eye Institute, Perth, Australia. They were used at a concentration of 4μg/ml and a dilution of 1:75 respectively. Anti-Mouse IgG (Fab specific)-FITC conjugate secondary antibody was used at a 1:64 dilution and anti-Rabbit IgG (whole molecule)-FITC conjugate secondary antibody was used at a 1:100 dilution (Sigma Immunochemicals, St Louis, Missouri).

HRPE7 and F2000 fibroblast cells were cultured in Lab Tek 8-well slide chambers (Nunc Inc. Naperville, Illinois). Cell cultures were fixed with methanol at -20°C for 10 minutes before immunofluorescent staining. All primary antibody solutions were incubated for 1 hour. The primary antibodies used for each of the two cell types were monoclonal anti ICAM-1, anti-CD44 as test and monoclonal anti-Human IgG as control, and polyclonal anti-RHAMM with a non-immune rabbit serum as control. Following the removal of the primary antibody, each well was washed three times with PBS and the secondary antibody was applied for 1 hour. The secondary antibody to the monoclonal antibodies was

antimouse IgG and the polyclonal was anti-rabbit IgG. The secondary antibodies wer applied to tissue without primary antibody as a further control. Finally, on removal of the secondary antibody, each well was washed a further three times before the well chambers were removed and the slides mounted with Immuno Fluore Mounting Medium (ICN Biomedicals Inc, Aurora, Ohio).

Immunohistochemical staining for CD44 using a monoclonal antibody demonstrated positive staining for both HRPE7 cells and F2000 fibroblasts, as shown in Figures 8a and 8b respectively. The staining had a distribution consistent with the cell surface, as the staining pattern was the same as the cellular outline of cultured tissue.

A monoclonal human anti-IgG was used as control, and was negative for both HRPE7 and F2000 fibroblasts. A second control, using secondary fluorescent antibody with no primary antibody was also negative for both cell types.

Immunohistochemical staining using a monoclonal antibody for ICAM-1 demonstrated positive staining for both HRPE7, and F2000 fibroblasts, as shown in Figures 8c and 8d respectively. The staining had a similar distribution to that of CD44, but the signal was slightly weaker. The same controls as for CD44 were used for ICAM-1 staining, and were also negative.

Staining for RHAMM receptors using a rabbit polyclonal antibody was positive for both HRPE7 and F2000 fibroblasts, as shown in Figures 8e and 8f respectively. The distribution of staining, however, was markedly different in the two cell types. In HRPE cells the staining pattern was predominantly nuclear, with a very faint cytoplasmic outline (Figure 8e). The distribution of staining in F2000 fibroblasts was similar to that of CD44 and ICAM-1, with no significant nuclear signal observable over the cytoplasmic or cell outline pattern.

The control serum was a rabbit non-immune serum, which was negative for HRPE7 but gave a very weak signal in F2000 fibroblasts. In both cases, the secondary

fluorescent antibody alone did not lead to a positive signal from either cell type.

Example 8 The Effects of Hyaluronic Acid Preparations of Different Molecular Weight on Tube Formation

Reagents

Hank's balanced salt solution (Hank's BSS) without calcium or magnesium, medium Hams F12, minimum essential medium with Earles salts (EMEM), foetal calf serum (FCS), penicillin-streptomycin, amphetericin B, and trypsin-EDTA were obtained from Australian Biosearch (Perth, Western Australia). Collagenase A, endothelial cell growth supplement (ECGF), mouse anti-human monoclonal antibody against factor VIII-related antigen, and anti-mouse Ig-fluorescein were acquired from Boehringer Mannheim Australia Pty. Ltd. (Perth, Western Australia). Gelatin, heparin, ascorbic acid were purchased from Sigma Chemical Company (Sydney, Australia), acetylated low-density lipoprotein (DiI-ac-LDL, 1,1'-dioctadecyl-3,3,3',3'-tetramethyl-indocarbo-cyanine perchlorate) from Biomedical Technologies, Inc. (Stoughton, Massachusetts), Matrigel from Collaborative Research (Bedford, Massachusetts), recombinant human vascular endothelial cell growth factor (VEGF) from Pepro Tech EC Ltd. (Rocky Hill, New Jersey), ProVisc (MW 1.9 x 10^6) from Alcon Laboratories, Healon (MW 2.5 x 10^6) and Healon GV (MW 5.0 x 10^6) from Pharmacia.

Isolation and Culture of Porcine Choriocapillary Endothelial Cells

Porcine eyes were obtained from a local abattoir 2-4 hours after death of the animals. The choriocapillary endothelial cells (CECs) were isolated as previously described (Morse *et al*, 1990, Sakomoto *et al*, 1995). Briefly, Hank's balanced salt solution (Hank's BSS) without calcium or magnesium, but with 0.1 % collagenase A was used to release endothelial cells at 37°C for 1 hour. After

washing twice in Hank's BSS, the cells were plated in 1 % gelatin-coated 75-cm^2 cell culture flasks in 5% CO_2, 95% air at 37°C. The growth m dium consisted of Hams F12 plus 10% fetal calf serum (FCS), 100 U penicillin-100 µg streptomycin/ml, 2.5 µg/ml amphotericin B, 37.5 µg/ml endothelial cell growth supplement (ECGS), heparin 100 µg/ml, and ascorbic acid 25 µg/ml. After 24 or 48 hours of plating the capillary segments, the colonies of endothelial cells showing a cobblestone appearance flattened and spread. On the third or fourth day, the non-endothelial colonies were recognised and were circled with a permanent marker pen on the top of 75-cm^2 flasks. A glass pipette which had been drawn through a flame to produce a bead tip was used to remove and crush any non-endothelial colonies within the circles (Folkman *et al.*, 1979). This technique was carried out under a phase contrast microscope (x10 phase objective) in a laminar flow hood. The medium was changed twice to remove floating cells. This procedure was repeated three to five times to enrich the primary cells for endothelial cells before they became confluent. The cells were identified as vascular endothelial cells by typical cobblestone morphology, presence of factor VIII-related antigen (Sakomoto *et al*, 1995), and positive staining (uptake) with DiI-ac-LDL (Folkman *et al*, 1979).

The Effects of Hyaluronic Acid on Tube Formation

The tube formation assay was performed as previously described (Haralabopoulos, *et al*, 1994. Briefly, Matrigel (16.1 mg protein/ml) was prepared from the Engelbreth-Holm Swarm tumour was used to coat 24 well cluster plates (250 µl/well) as recommended by the product sheet. After polymerisation of the Matrigel at 37°C for 30 minutes in CO_2 incubator, 0.5 ml medium containing 10 or 20 µg/ml of hyaluronic acid preparations of different molecular weights (ProVisc, MW 1.9 x 10^6; Hyal MW 2.5 x 10^6 and HealonGV MW 5.0 x 10^6 respectively) in MEM with 10% FCS

was added to the Matrigel coated wells. 10% FCS in 0.5 ml MEM was us d for comparison of a relative unit of the tube area. The CECs (passage 3-7) were lifted from flasks by 0.25% trypsin-0.02% EDTA, suspended in 5% MEM, and added to the coated wells (50,000 cells/well in 0.5 ml medium). To evaluate the areas of tube-like structures on the gel, photographs were taken with a phase-contrast microscope after six hours. Five to seven fields (x10 objective) were chosen randomly in each well for quantitative study.

Choriocapillary Endothelial Cells

Primary cultures of capillary endothelial cells have a characteristic appearance that distinguishes them from other cell types. In addition they were characterized by staining for factor VIII-related antigen, and assaying for the ability to phagocytize DiI-ac-LDL. More than 95% of the CECs showed a positive reaction to factor VIII-related antigen. Almost every cell showed uptake of DiI-ac-LDL into the cytoplasm, as shown in Figure 9. This indicates that at least 95% of the cells were choriocapillary endothelial cells (CEC cells).

Quantification of Tube Formation and Statistical Analysis

The tube areas from duplicate wells were measured using a Computer Imaging Analyzer System (Professional Image Processing for Windows, Matrox Inspector). The slide photographs were scanned into a computer and the background adjusted to obtain the best contrast between the tubes and Matrigel. Tube formation was then quantified by measuring the total tube area of each photograph. The results were expressed as the mean and the standard error of the percentage of tube area in the presence of 7.5% FCS alone (the final concentration) and were analyzed by Student's t-test for at least two experiments.

Tube Formation

After 1 hour of being seeded on the top of Matrigel, the CECs became attached. Within 2-3 hours the CECs rapidly migrated into a reticular network of aligned cells. After 3 hours the CECs started to flatten and form capillary-like structures on the surface of Matrigel. By 6 hours capillary-like structures became apparent, showing an anastomosing network like vessel tubes. Tube formation in control and experimental samples containing different preparations of hyaluronic acid at a biologically active concentration was assessed after six hours, and the results are summarized in Figure 10 and Tables 10 to 13.

Table 10

Pro VisK (5 µg/ml)	Pro Visk (10 µg/ml)	Healon (5 µg/ml)	Healon (10 µg/ml)
60.3	139.91	119.37	118.33
49.64	122.96	134.01	111.22
90.03	47.38	39.96	47.48
41.78	36.1	37.12	68.9
59.04	99.4	142.32	126.36
129.2	106.05	72.63	117.69

Table 11

Healon GV (5 µg/ml)	Healon GV (10 µg/ml)	Control
115.22	86.16	155.09
111.57	62.57	118.71
114.42	78.88	85.08
105.06	145.59	43.34
22.64	136.12	94.91
104.08		102.94

Table 12

Anova: Single Factor

SUMMARY

Groups	Count	Sum	Average	Variance
Column 1	6	429.99	71.67	1062.86
Column 2	6	551.8	91.97	1724.36
Column 3	6	545.41	90.90	2226.80
Column 4	6	589.98	98.33	1035.70
Column 5	6	572.99	95.50	1295.74
Column 6	5	509.32	101.86	1351.08
Column 7	6	600.07	100.01	1370.50

Table 13

ANOVA

Source of Variation	SS	df	MS	F	P-value	F_{crit}
Between Groups	3655.25	6	609.21	0.42	0.86	2.38
Within Groups	48984.10	34	1440.71			
Total	52639.35	40				

There was no statistically significant difference in CEC tube formation between the control and hyaluronic acid-containing samples, demonstrating that hyaluronic acid of molecular weight between MW 300,000-5,000,000 does not induce neovascularisation in the absence of another agent.

Example 9 Demonstration of the Presence of CD44 HA Receptor in the Human Retina

Preparation of Human Retina

A human Eye Bank donor eye was dissected following the removal of the cornea. After discarding the anterior segment the vitreous was carefully removed, leaving behind some parts of the neural retina and the complete layer of pigment epithelium attached to the choroid. The eye cap was filled with 2.5% glutaraldehyde for fixation. Sections of the fixed tissue were subjected to paraffin embedding. Paraffin blocks were cut and sections were transferred on to glass histochemical slides, dewaxed in xylane and ethanol, and washed in distilled water and Tris-buffered saline pH 7.2 (TBS).

Alkaline Phosphatase Staining of Sections

Removal of melanin granules was achieved by incubating the eye sections in 50 µl 0.25% potassium permanganate for 45 minutes followed by 50 µl 1.0% oxalic acid for 5 minutes. Bleaching was carried out following incubation with serum 50 µl/section of 10% normal horse serum/TBS (Commonwealth Serum Laboratories, Perth, Australia) for 30 minutes. Sections were then washed twice in TBS, 5 minutes per wash and incubated in 50 µl mouse anti-CD44 monoclonal antibody (Boehringer Mannheim Biochemica, Mannheim, Germany) or 50 µl of mouse anti-81-11 monoclonal antibody (non-immune control) for 60 minutes. After incubation sections were again washed twice in TBS, 5 minutes per wash, incubated in 50 µl of 1/250 horse anti-mouse IgG (H+L) conjugated to alkaline phosphatase conjugated to alkaline phosphatase (secondary antibody) for polyclonal antibodies for 60 minutes and washed twice in TBS, 5 minutes per wash. Sections were incubated in 50 µl FAST RED (Sigma Aldrich, St louis, USA) for 20 minutes, washed twice in TBS, 5 minutes per wash and counterstained in Meyer's Haemotoxylin for 10 minutes, followed by 5 minutes in tap water. Sections were allowed to dry, then

mounted using glycerol jelly.

Bleaching of melanin was carried out successfully without causing damage to th tissue sections, as shown in Figure 10. Staining of glutaraldehyde-fixed human eye sections with the mouse control monoclonal antibody and FAST RED resulted in clear staining of the RPE layer in unbleached tissue (Figure 10A) and following bleaching after incubation with 10% normal horse serum (Figure 10B). A strong pink signal demonstrating the specific presence of CD44 HA receptors in the retinal pigment epithelium but not in the choroid was observed in tissue stained with anti-CD44 monoclonal antibody (Figure 10C). As in choroid th re was no signal detected in the neural retina.

These results demonstrate that the retinal pigment epithelial cells preferentially express HA receptors, thus facilitating an enhanced uptake of HA complexes.

Example 10 Up and Down Regulation of Cathepsin D Expression in NIH 3T3 Cells

A 1620 bp HindIII fragment of human cathepsin D was subcloned into pHBApr-1-neo vector in both sense and anti-sense directions. Positive clones were selected, and the orientation of the fragments was confirmed by EcoRI restriction enzyme analysis. For the transfections of NIH 3T3 cells the clones carrying cathepsin D in the anti-sense and sense directions were on caesium chloride density gradients.

NIH 3T3 cells were seeded on to 6-well tissues culture plates at a concentration of 2 X 10^5 in 2 ml DMEM supplemented with 10% fetal bovine serum (FBS). The cells were incubated overnight at 37°C until they became 70% confluent. Having reached confluency, the cells were washed twice with serum and antibiotic-free medium. Lipofection reagent (10 µl) (GIBCO-BRL) diluted in 100 µl of OPTI-MEM (GIBCO-BRL) were gently mixed and incubated at room temperature for 15 minutes. Following incubation, an

additional 800 µl of OPTI-MEM was added to the mixture. This dilut d mixture was gently overlaid onto the washed NIH 3T3 cells. The cells were incubated for 16-20 hrs before the transfection media was removed and replaced with DMEM supplemented with 10% FBS. After a further 48 hrs incubation the cells were trypsinised and subcultured at 1:5 in media containing 10% FBS and Geneticin 418 (GIBCO-BRL) at 1 ng/ml concentration. Successfully transfected cells selected with Geneticin 418 were maintained in media supplemented with FBS and Geneticin 418 as described above. Confluent transformed cultures were frozen for storage and subcultured for further analysis. The presence of cathepsin D in the transformed NIH 3T3 cells was detected with polyclonal antibody against cathepsin D, using a conventional cytochemical technique and an alkaline phosphatase-labelled second antibody.

The presence of cathepsin D fragment of the vector was demonstrated with HindIII digestion. Positive clones showed the presence of a 1620 kb fragment. The orientation was established by ECO RI restriction enzyme digestion, which gave two fragments at 5.7 and 5.9 kb in the case of the anti-sense orientation and 4.3 and 7.3 kb in the case of the sense orientation. All NIH 3T3 cells surviving Geneticin 418 selection carried cathepsin D clones, which are antibiotic resistant. The transformed control NIH 3T3 cells did not survive the selection procedure. The immunocytochemistry results suggest that NIH 3T3 cells carrying cathepsin D in the sense direction up-regulated cathepsin D production, while those carrying cathepsin D in the anti-sense direction down regulated cathepsin D production.

Example 11 Production of a $VEGF_{165}$-Expressing RPE Cell Line

Cell Culture

The human RPE cell line 407A (Davis *et al*, 1995), was maintained at 37°C in a humidified environment

containing 5% CO_2. The culture medium consisted of Minimal Essential Medium (MEM, Trac Biosciences, Sydney, NSW, Australia) supplemented with 10% FCS (Trace Biosciences, Sydney, NSW, Australia) and 100 IU/ml Penicillin/100 µg/ml Streptomycin (P/S) (ICN Pharmaceuticals Inc, Costa Mesa, CA, USA). Cells were passaged 1 in 5 with 0.25% trypsin (Trace Biosciences, Sydney, NSW, Australia)/0.05% EDTA (BDH Chemicals Australia Pty Ltd, Kilsyth, VIC, Australia) approximately every 5 days.

Cloning of $VEGF_{165}$ into the Expression Vector

Mouse $VEGF_{165}$ in Bluescript KS was obtained from Dr Georg Breier, Max Planck Institut, Germany (Breier *et al*, 1992). $VEGF_{165}$ was inserted into the Bam HI site of pHβAPr-1-neo (Figure 1) (Gunning *et al*, 1987). This cloning was performed via pGem 7Zf(+) (Promega, Madison, WI, USA) for the addition of a Bam HI site to the 3' end of $VEGF_{165}$. A sense VEGF-pHβAPr-1-neo clone was identified by Eco RI digestion (Promega, Madison, WI, USA). VEGF-pHβAPr-1-neo DNA was prepared using the Qiagen Plasmid Midi Kit (Qiagen GmbH, Hilden, Germany). The extraction was carried out as described in the manufacturer's protocol, and the resulting pellet was resuspended in 500 µl TE buffer (10 mM Tris HCL, pH 8.0, 1 mM EDTA).

Transfection of RPE Cell Line

VEGF-pHβAPr-1-neo DNA was transfected into 407A cells using Lipofectin (Gibco BRL, Gaithersburg, MD, USA) as described in the manufacturer's instructions. Briefly, 2 mg of VEGF-pHβAPr-1-neo DNA in 100 µl OPTI-MEM (Gibco BRL, Gaithersburg, MD, USA) was mixed with 5 µl Lipofectin reagent in 100 µl OPTI-MEM. The mixture was allowed to stand at room temperature for 15 minutes, then made up to 1 ml with OPTI-MEM, and overlaid on to 60% confluent 407A cells. The cells were incubated at 37°C overnight in a humidified environment and 5% CO_2, then 4 ml MEM with 10% FCS and P/S was added. The cells were re-incubated for

24 hours before 1 mg/ml Geneticin (Gibco BRL, Gaithersburg, MD, USA) was included in the c 11 culture medium. After one week a series of discrete colonies was selected, and grown in 1 mg/ml Geneticin until established. The concentration of Geneticin was then decreased to 300 µg/ml cell culture medium.

A control cell line consisting of 407A cells transfected with pHβAPr-1-neo only (407A-pHβAPr-1-neo) was also produced using Lipofectin. Both cell lines were maintained in MEM containing 10% FCS, P/S and 300 µg/ml Geneticin.

Selection of Primers for DNA and RT PCR

Primers were selected to allow specific amplification of transfected mouse $VEGF_{165}$, without background amplification of human $VEGF_{165}$ from the human 407A cell line. The sequences of mouse $VEGF_{165}$ and human $VEGF_{165}$ as listed on the GenBank database were compared using the IBI Pustell Analysis Software (IBI Ltd, Cambridge, England). 19mer regions which were less than 70% homologous with human $VEGF_{165}$ were selected from mouse $VEGF_{165}$. Primer sequences were: "VEGFMO1", 115-134 bp on mouse $VEGF_{165}$, 5'-AGG AGA GCA GAA GTC CCA T; "VEGFMO2", 300-318 bp on mouse $VEGF_{165}$ 5'-CGT CAG AGA GCA ACA TCA C. Analysis of primer sequences by the Basic Local Alignment Search Tool (BLAST, National Centre for Biotechnology Information, Bethesda, MD, USA) demonstrated homology to mouse VEGF forms only.

DNA PCR

Cells were harvested using 0.25% trypsin/0.05% EDTA. Samples of 2 x 10^6 cells were collected and washed with PBS, then incubated for 3 hours, 37°C, in the presence of 100 ng/ml Proteinase K (Boehringer Mannheim, Mannheim, Germany) and 0.5% w/v Sodium Dodecyl Sulphate (SDS) (BDH Chemicals Australia Pty Ltd, Kilsyth, VIC, Australia). DNA was isolated by phenol/chloroform extraction and sodium

acetate/ethanol precipitation. DNA pellets wer resuspended in 100 µl TE buffer.

All PCR reagents, including Ultra Pure Water, were obtained from Biotech International Ltd. (Bentley, WA, Australia). The PCR reaction mixture consisted of 5 µl 5X Polymerisation Buffer, 25 mM $MgCl_2$, 1U *Tth Plus* DNA Polymerase, 50 ng VEGFMO1, 50 ng VEGFMO2 and Ultra Pure Water to 25 µl. 1 µl of each DNA sample was used for PCR. For each series of PCR reactions carried out, a positive control containing 20 ng VEGF-pHβAPr-1-neo DNA, and a negative control containing Ultra Pure Water in the place of DNA, were included. PCR reactions were carried out using a Perkin Elmer GeneAmp PCR System 2400 Thermocycler (Perkin-Elmer Corporation, Norwalk, CT, USA). Cycles us d were 1 cycle of 92°C for 5 minutes, 55°C for 1 minute, 74°C for 1 minute; 35 cycles of 92°C for 1 minute, 55°C for 1 minute, 74°C for 1 minute; 1 cycle of 92°C for 1 minute, 55°C for 1 minute, 74°C for 10 minutes. The PCR products were electrophoresed on a 2% agarose gel, and visualised by ethidium bromide staining.

Reverse Transcription PCR (RT PCR)

RNA was extracted using RNAzolB (Biotecx Laboratories Inc., Houston, Texas, USA). The procedure was carried out as described in the manufacturer's protocol, with RNA being extracted directly from confluent 25 cm^3 flasks of cells (4 x 10^6 cells per flask). The resulting pellets were resuspended in 50 µl Diethyl Pyrocarbonate (DEPC) (BDH Ltd, Poole, Dorset, England) treated water.

RT PCR was performed using the GeneAmp Thermostable rT*th* Reverse Transcriptase RNA PCR Kit (Perkin-Elmer Corporation, Norwalk, CT, USA). Reverse transcription and PCR reactions were carried out as described in the manufacturer's instructions. 200 ng RNA was used for each reaction. Water used for all reactions was Ultra Pure Water. The RT PCR positive control contained 20 ng of VEGF-pHβAPr-1-neo DNA. The negative

control received Ultra Pur Water in the place of RNA. Controls for DNA contamination were produced by the addition of *rTth* DNA Polymerase after completion of the Reverse Transcription step. RT PCR products were precipitated using sodium acetate/ethanol. Samples were washed in 70% ethanol and resuspended in TE buffer to 1/5 the PCR reaction volume. PCR products were electrophoresed on a 2% agarose gel and visualised by ethidium bromide staining.

Production of a $VEGF_{165}$-Expressing Retinal Pigment Epithelial Cell Line

$VEGF_{165}$ was successfully cloned into the Bam HI site of pHβAPr-1-neo. The identity of the clone was confirmed using a Bam HI digest which yielded two fragments of 10.0 kb, corresponding to pHβAPr-1-neo, and 656 bp, corresponding to mouse $VEGF_{165}$. Eco RI digestion of the VEGF-pHβApr-1-neo clone produced two fragments of 5.7 kb and 5.0 kb, confirming that VEGF was in the sense orientation.

VEGF-pHβApr-1-neo was transfected into the 407A cell line using Lipofectin. The presence of mouse $VEGF_{165}$ DNA in the transfected 407A cell line was confirmed using DNA PCR. DNA was extracted from VEGF-pHβApr-1-neo transfected 407A colonies, along with DNA from the control 407A-pHβApr-1-neo cell line. PCR of the VEGF-pHβApr-1-neo transfected 407A DNA resulted in the production of a 200 bp DNA fragment in every colony tested. This fragment was the size predicted from the position of the primers on the mouse $VEGF_{165}$ gene, and agreed with the fragment size produced from the VEGF-positive control. One established colony of transfected cells was chosen for the remainder of the experiments (407A-VEGF). No signal was detected on PCR of 407A-pHβApr-1-neo. The results are illustrated in Figure 11A. DNA from untransfected 407A cells also produced PCR signal, confirming that the primers being used were specific to mouse $VEGF_{165}$.

RT PCR was used to verify the production of mouse $VEGF_{165}$ mRNA by 407A-VEGF. On RT PCR of 407A-VEGF total RNA, a fragment of 200 bp was produced, corresponding to the fragment size predicted from the position of the mous $VEGF_{165}$ primers. No signal was received from 407A-pHβApr-1-neo total RNA. Both RNA samples were shown to be free of contaminating DNA by omission of the cDNA synthesis step during RT PCR. The results are shown in Figure 11B. RT PCR using untransfected 407A RNA did not produce any signal.

Tube Formation Assay

The assay was performed as described in Example 8. CEC adhered to the Matrigel support within 1 hour of seeding. After 2 to 3 hours of culture, the CEC had migrated rapidly to form a reticular network of aligned cells, and subsequently began to form capillary-like structures on the surface of Matrigel. By 24 hours the CEC had the appearance of an anastomosing network, which is typical of vascular tubules. The quantitative analysis of tube formation, obtained from computer images, is summarised in Figure 13.

The most extensive capillary network was seen in CEC cultured in the presence of 100 ng/ml human recombinant VEGF (Figure 13B). The amount of capillary tube formation induced by the 407A-VEGF conditioned medium was similar to that from the human recombinant VEGF. In contrast the level of tube formation from conditioned medium of the control 407A-pHβAPr-1-neo cell line was significantly less, and was comparable to the control cultures containing Ham's F12 medium with 5% FCS and P/S only.

There was a 100% increase in the amount of tube formation induced by 407A-VEGF conditioned media when compared to 407A-pHβAPr-1-neo. This difference was found to be significant ($P = 0.009$, Student's t-test). The difference between the control culture and the culture containing 100ng/ml human recombinant VEGF was also found

to be significant (P = 0.002, Student's t-test).

Example 12 Cloning and Characterisation of Human RPE Vascular Endothelial Growth Factor (RPE-VEGF)

Human RPE cells, available in our laboratory, are grown in tissue culture. To upregulate VEGF expression, cell cultures are treated in hypoxic conditions. The upregulation of VEGF expression is monitored with immunohistochemistry. The mRNA is extracted from 10^7 RPE cells, and a cDNA library carrying all genes expressed in the RPE/choroid is established using methods known in the art.

VEGF is a highly conserved molecule which is highly homologous between different species. A murine VEGF cDNA clone, available in our laboratory, is used to screen the human RPE cDNA library in order to identify the full length human RPE-VEGF clone. Positive clones are analysed by restriction enzyme analysis and finally by DNA sequencing. Full length RPE-VEGF clones are analysed to elucidate their genomic structure (initiation sequences, start and stop codons, putative exons *etc.*).

Clones carrying the full length RPE-VEGF are analysed for the expression of VEGF protein with *in vitro* translation. The identified clones are used to derive the anti-sense molecule for insertion into the vehicle system, and for the selection of the anti-sense oligonucleotides.

Example 13 Pharmaceutical Agent for the Short-Term Inhibition of VEGF Expression

Anti-sense DNA technology enables the sequence-specific inhibition of target molecules without affecting the non-targeted functions of the cell. As described above, we have demonstrated both *in vitro* and *in vivo* that anti-sense DNA can be used effectively to inhibit the anti-sense oligonucleotide into the vitreous.

A panel of 16 to 19-mer oligonucleotides, 100% complementary to parts of the VEGF gene, is selected from the 5' and 3' ends of th DNA sequence. Sense and scrambled sequences are also used as control. Phosphorothioate-protected oligonucleotides are synthesiz d on a DNA synthesizer and subjected to purification.

Example 14 Anti-Sense Agent for the Long-Term Inhibition of VEGF Production

Preparation of VEGF-pAd.RSV for Homologous Recombination

$VEGF_{165}$ in Bluescript IIKS (Stratagene) was used to produce KpnI sites. Kpn I restriction enzyme sites were obtained at both the 5' and 3' ends of $VEGF_{165}$ by subcloning. $VEGF_{165}$ was removed from Bluescript II KS using an Xba I (5' cut)/Kpn I (3' cut) restriction enzyme digest, and cloned into pGem 7Zf(+) (Promega). A Kpn site was then added to the 3' end by cloning $VEGF_{165}$ into pGem 3Zf(+) (Promega), using a Hind III (3' cut)//Xba I (5' cut) digest.

VEGF was removed from pGem 3Zf(+) with a Kpn I restriction enzyme digest and cloned into the unique Kpn I site on pAd.RSV. This plasmid contains two segments of the adenovirus genome separated by cloning sites for the insertion of foreign DNA. The resulting clones were screened for the presence of sense and antisense clones, which were used in homologous recombination (VEGF-pAd.RSV). $VEGF_{165}$ was shown to be present and intact within pAd.RSV by restriction enzyme cleavage and sequencing.

VEGF-pAd.RSV DNA was prepared using the Qiagen Plasmid Midi Kit, as per the manufacturer's instructions. The DNA was linearised by Xmn I restriction enzyme digestion, purified by sodium acetate/ethanol precipitation and resuspended in TE buffer. The DNA was then stored at -20°C until required.

Generation of Ad.RSV-VEGF or Ad.RSV-aVEGF by Homologous Recombination

Th adenovirus type 5 deletion mutant, d1324, was used to generate the recombinant adenovirus carrying VEGF. d1324 is unable to replicate due to deletion of the E1 region and, in addition, carries a partial deletion in the E3 region. In order to generate viral particles this mutant was propagated in 293 cells, which supply the missing E1 region in trans. The linearised plasmid DNA pAdRSV-VEGF or pAd.RSV-aVEGF was co-transfected into 293 cells with d1324 viral DNA which has had its extreme left-hand sequences removed by a Cla1 digestion. This reduces the infectivity of d1324 and allows for easier identification of recombinants. After transfection using the calcium phosphate precipitation method, screening of the resultant plaques yielded recombinant AdRSV-VEGF virus carrying VEGF in sense or antisense orientation.

Example 15 Construction of a Vehicle for the Permanent Expression of Target Molecules

The vehicle described in Example 14 is suitable for long-term treatment in that it provides temporary (maximum one year) expression of the anti-sense VEGF DNA molecule, and consequent protection against neovascularisation. To achieve indefinite treatment, we use a vector system which enables the integration of VEGF in the anti-sense direction into the human genome present in RPE cells using an adeno-associated virus (AAV) vector, which means that the protection against neovascularisation can be provided for the rest of the life of the patient, as long as the RPE cells remain functional.

Adeno-associated viruses are non-pathogenic, are able to infect non-dividing cells, and have a high frequency of integration. We use AAV-2, which is a replication defective parvovirus which can readily infect other cells such as RPE cells, and integrate into the genome of the host cells. Recent characterisation has

revealed that AAV-2 specifically targets the long arm of human chromosome 19.

AAV constructs use varying promoter sequences in combination with a reporter gene. The expression of the reporter gene mRNA is detected with PCR amplification or *in situ* PCR, and the integration of the reporter gene is identified by chromosomal analysis of RPE cells.

Using the appropriate restriction sites, the reporter gene is replaced by anti-sense VEGF DNA. The new construct is co-transfected with the complementing plasmid (pAAV/ad) into kidney 293 cells previously infected with adenovirus type 5 to make the rAAVaVEGF construct. The construct produced is used to infect RPE cells, and the expression of anti-sense VEGF is detected by PCR amplification.

Example 16 Model Systems for Testing Inhibition *In Vitro*

Human VEGF is cloned into COS cells to produce a culture system (VEGF-COS) in which the effective inhibition of VEGF expression can be tested. The inhibition of VEGF expression is tested by Northern and Western blot analyses and quantified by immunoassay.

The toxicity of increasing concentrations of oligonucleotides on COS cells is assessed with the trypan blue assay. The proliferation of COS cells is monitored with or without increasing concentrations of oligonucleotides. The inhibition of the expression of VEGF in controls and in cultures maintained in the presence of anti-sense oligonucleotides is monitored by Northern and Western blot analyses, immunocytochemistry and by a quantitative immunoassay.

RPE cells are cultured in hypoxic conditions and the up-regulation of VEGF expression is monitored in the presence of increasing concentrations of oligonucleotides for an extended period of time. Toxicity, proliferation assay and the monitoring of VEGF expression are performed

as described above.

CEC cells are cultured in normal and hypoxic conditions with or without increasing concentration of oligonucleotides. In addition to the toxicity, proliferation assay and VEGF detection, the effect of anti-sense oligonucleotide-mediated inhibition of VEGF expression on tube formation is analysed. RPE/CEC dual cultures produced in normal and hypoxic conditions will be subjected to similar tests. The same model systems are used to assess the long-term and permanent agents of the invention.

Example 17 *In Vivo* Model for Sub-Retinal Neovascular Membrane (SRNVM)

In addition to the above examples an animal model for study of the particular inhibition of the development of SRNV was developed. The model uses laser treatment of rats to induce symptoms similar to those observed in humans as SRNV.

Pigmented rats (Dark Agouti, DA) weighing between 175 and 250 g were anaesthetized with an intramuscular injection of xylazine hydrochloride (2 mg/kg of body weight), acepromazine maleate (0.5 mg/kg), and ketamine hydrochloride (100 mg/kg of body weight) and given topical 0.5% proparacaine hydrochloride. The pupils were dilated with 2.5% phenylephrine hydrochloride.

Krypton laser radiation (647 nm) was delivered through a Zeiss slip lamp (Coherent Model 920 Photocoagulator, Palo Alto, Calif) with a handheld coverslip (22 c 30 mm) serving as a contact lens. Laser parameters used were as follows: a spot size of 100 μm, a power of 150 mW, and an exposure duration of 0.1 s. An attempt was made to break Bruch's membrane, as clinically evidenced by central bubble formation with or without intraretinal or choroidal hemorrhage. We found that a treatment power of 150 mW most consistently produced this effect.

Approximately 40% of animals treated the above described way developed growth of blood vessels into the retina from the choroid. This growth is accompanied by the upregulation of VEGF expression, providing an excellent system to test our oligonucleotides and constructs.

Example 18 Inhibition of RPE-VEGF Expression with Anti-Sense Oligonucleotides, Ad.RSV.aVEGF and rAAVaVEGF *In Vivo* in Rats

Neovascularisation can be induced using pocket implants in the choroid or the subretinal layer. One of the disadvantages of these models is that the process of neovascularisation might not follow the same biochemical steps which naturally occur in humans suffering from ARMD. To overcome these difficulties we use an animal model in which choroidal neovascularisation is induced by VEGF overexpression in the RPE cells. Using recombinant adenoviruses carrying VEGF, for example Ad.RSV.VEGF, for the *in vivo* trials all animal models described above are utilised to provide us with a wide range of information. Tests are conducted to demonstrate the expression of a VEGF expression over a period of one year. Using Northern and Western blot analysis, VEGF down-regulation is monitored and immunohistochemistry is used to demonstrate the down-regulation of VEGF expression in a cell-specific manner. Using the above described animal models, choroidal neovascularisation is monitored by histology and angiography. These models are applicable to all the embodiments of the invention.

It will be appreciated that the present invention is particularly useful in the study, treatment or prevention of age-related macular degeneration, by virtue of the successful adenoviral gene transfer to the RPE. Without wishing to be bound by any proposed mechanism for the observed advantages, the higher degree of gene expression in the HRPE7 cells, compared with the F2000

cells, may indicate the ability of RPE cells to phagocytose large molecules and hence increase the uptake of adenovirus. The level of expression of the transgene may also be increased by increasing the time of exposure or the viral titre.

The comparison studies between the HRPE7 cells and the F2000 fibroblast show that there are marked differences in the pattern of expression between the different cell types under the same conditions. These differences could be exploited for targeting of different cells, for example RPE. The upstroke in the time/expression curve for RPE cells (Figure 5) was at 4 hours, while for F2000 cells it was 24 hours. There is, therefore, a window during which RPE cells are taking up Ad.RSV.βgal. and expressing the transgene at a significantly higher level than F2000 fibroblasts. Transfection for periods of less than 24 hours would allow use of this window as a targeting tool (eg. virus solutions could be aspirated from subretinal blebs or the vitreous after 24 hours). The titre/expression curves (Figure 5) also show that there was a difference between the cells, with RPE cells beginning to express highly at a lower concentrations. Once again, low concentration could be used to preferentially target RPE cells. A combination of lower titres for less than 24 hours would combine the two effects and provide targeted delivery.

As shown in some of the embodiments, the present invention may also be used in conjunction with adjuvants to keep viral toxicity to a minimum by reducing the titre required to effect gene transfer and expression.

We have shown a consistent and significant adjuvant effect for adenoviral gene transfer using HA. This was the case in both phagocytic and non-phagocytic cell lines. The advantage of HA is its presence as a normal component of human vitreous and extracellular matrix, and its long history of therapeutic acceptance as a viscoelastic aid to surgery.

The important featur of HA in terms of its acting as a potential adjuvant is its ability to bind cell membranes and other molecules simultaneously. We propose that the HA molecule can bind adenovirus and the cell membrane at the same time, and therefore increase the contact time or concentration of virus in the vicinity of the cell membrane using this mechanism. We have identified cell surface receptors specific to HA identified on both F2000 and RPE7, as each cell tested positive for the presence of CD44, RHAMM and ICAM-1 receptors. Interestingly, the RHAMM receptors on RPE showed a nuclear distribution, and this could account for the slightly higher adjuvant effect of HA in RPE than in F2000. Our preliminary studies of *in vivo* immunofluorescent staining for CD44 show no signal in the neuroretina, suggesting that HA association of the adenovirus may also be a potential targeting mechanism for RPE *in vivo*.

It will be apparent to the person skilled in the art that while the invention has been described in the Examples, various modifications and alterations to the embodiments described herein may be made without departing from the scope of the inventive concept disclosed in this specification.

References cited herein are listed on the following pages, and are incorporated herein by this reference.

REFERENCES

Aiello *et al*
New England Journal of Medicine, 1994 331 1980-1987

Akhtar, S. and Ivinson, A.J.
Nature Genetics, 1993 4 215-217

Algvere, P.V.
Graefes Arch. Clin. Exp. Ophthalmol., 1994 232 707-716

Bennett *et al*
IOVS, 1994 35 2535-2542

Bok, D. and Young
The Retinal Pigment Epithelium
Ed Zina K and Marmor M (Harvard University Press, 1979)
148-174

Boris-Lawrie, K.A.
Genetics and Development, 1993 3 102-109

Breier, G., Albrecht, U., Sterrer, S. and Risau, W.
Development, 1992 114 521-532.

Culver, K.W. *et al*
Science, 1992 256 1550-1552

Davis, A.A., Bernstein, P.S., Bok, D., Turner, J.,
Nachtigal, M. and Hunt, R.C.
Invest. Ophthalmol. Vis. Sci., 1995 36 955-964.

Engler, C.B. *et al*
ACTA Ophthalmologica, 1994 71 27-31

Folkman, J., Haudenschild, C.C. and Zetter, B.R.
Proc. Natl. Acad. Sci., USA, 1979 76 5217-5221

Fung, W.E.
Ophthalmol., 1991 110 1383-1384

Graham, F.C. *et al*
Gene Transfer and Expression Protocols, The Humane Press Inc., Clifton, NJ, USA 1991:101-128

Gunning, P., Leavitt, J., Muscat, G., Ng, S. and Kedes, L.
Proc. Natl. Acad. Sci. USA, 1987 84 4831-4835.

Guyer, D.R. *et al*
Am. J. Ophthalmol., 1992 112 349-350

Haralabopoulos, G.C., Grant, D.S., Kleinman, H.K., Lelkes, P.I., Papaioannou, S.P. and Maragoudakis, M.E.
Lab. Invest., 1994 71 575-582.

Hata *et al*
Virchows Arch., 1995 426 479-486

Helene, C.
Eur. J. Cancer, 1991 27 1466-1471

Hudson, H., Frambach, D. and Lopez, P.
Brit. J. Ophthalmol., 1995 79 417-423

Ibanez, H.E. *et al*
Arch. Ophthalmol., 1995 113 62-69

Johnson, P.A.
J. Virology, 1992 66 2952-2965

Kaneda, Y. *et al*
Exp. Cell Res., 1987 173 56-69

Kennedy, C.J. *et al*
Exp. Cell Res., 1994 210 209-214

Kozarsky, K.F. and Wilson, J.M.
Genetics and Development, 1993 3 499-503

Le Gal La Salle, G. *et al*
Science, 1993 259 988-990

Li *et al*
Invest. Ophthalm. Vis. Sci., 1994 35 2543-2549

McInnes, R.R. and Bascom
Nat. Gen., 1992 1 155-157

Malecaze *et al*
Arch. Ophthamol., 1994 112 1476-1483

Mashmour *et al*
1994 1 122-126

Milam, A.H.
Neurobiology, 1993 3 797-804

Miller *et al*
Am. J. Physiol., 1994 45 574-584

Morse, L.S. and Sidikaro, Y.
Curr. Eye Res., 1990 9 631-642

Pe'er *et al*
Lab. Invest., 1995 72 638-645

Pierce *et al*
Proc. Natl. Acad. Sci., 1959 92 905-909

Simorre-Pinatel *et al*
Invest. Ophthal. Vis. Sci., 1994 35 3393-3400

Rakoczy, P.E.
Invest. Ophthalm. Vis. Sci., 1994 35 4100

Rakoczy, P.E. *et al*
Biol. Cell, 1992 76 49-54

Sakomoto, T., Sakomoto, H., Hinton, D.R., Spee, C., Ishibashi, T. and Ryan, S.J.
Curr. Eye Res., 1995 14 621-627

Salmons, B. and Günzburg, W.H.
Science, 1992 256 1550-1552

Schachat A.P.
Arch. Ophthalmol., 1994 112 459-461

Siegfried, W.
Exp. Clin. Endocrinol., 1993 101 7-11

Stratford-Perricaudet LD *et al*
J.Clin Invest. 1992 90 626-630

Thiema *et al*
Diabetes, 1995 44 98-103

Wagner, R.W.
Nature, 1994 372 333-335

Wagner, R.W. *et al*
Nature Biotechnology, 1996 14 840-843

CLAIMS

1. A composition comprising a nucleic acid and a hyaluronic acid or a derivative thereof, together with a pharmaceutically-acceptable carrier.

2. A composition according to Claim 1, in which the nucleic acid is a nucleotide sequence which is in the anti-sense orientation to a target sequence.

3. A composition according to Claim 2, in which the target nucleic acid sequence is a genomic DNA, a cDNA, a messenger RNA or an oligonucleotide.

4. A composition according to Claim 1, in which the nucleic acid is present in a vector comprising a nucleic acid sequence to be transferred into a target cell.

5. A composition according to Claim 4, in which the nucleic acid sequence to be transferred is a genomic DNA, a cDNA, a messenger RNA or an oligonucleotide.

6. A composition according to Claim 5, wherein the vector comprises a sense sequence to be provided to a target cell in order to exert a function.

7. A composition according to Claim 6, in which the vector comprises an anti-sense sequence to be provided to a target cell in order to inhibit the functioning of a nucleic acid present in the target cell.

8. A composition according to any one of Claims 1 to 7, in which the vector is a liposome.

9. A composition according to any one of Claims 1 to 8, in which the vector is a virus.

10. A composition according to any one of Claims 1 to 9, in which the virus is an adenovirus, an adeno-associated virus, a herpes virus or a retrovirus.

11. A composition according to Claim 9, in which the virus is a replication-defective adenovirus.

12. A composition according to Claim 11, where the virus is a replication-defective adenovirus comprising a promoter selected from the group consisting of respiratory syncytial virus promoter, cytomegalovirus promoter,

adenovirus major late protein (MLP), VA1 pol III and β-actin promoters.

13. A composition according to Claim 11, wherein the vector is pAd.RSV, pAd.MLP or pAd.VA1.

14. A composition according o Claim 11, wherein the vector is Ad.RSV.aVEGF or Ad.VA1.aVEGF.

15. A composition according to any one of Claims 10 to 14, wherein the vector also comprises a polyandenylation signal sequence.

16. A composition according to Claim 15, wherein the polyadenylation signal sequence is the SV40 signal sequence.

17. A method of treatment of a pathological condition in a subject in need of such treatment, comprising the step of administering an effective dose of a composition according to any one of Claims 1 to 16 to said subject.

18. A method according to Claim 17, in which the composition is administered systemically by injection.

19. A method according to Claim 17, in which the composition is administered topically.

20. A method according to Claim 17, in which the composition is administered directly into the tissue to be treated.

21. A method of preparing a composition according to any one of Claims 1 to 16, comprising the step of binding a nucleic acid or vector to a hyaluronic acid or a derivative thereof, and isolating the thus-formed complex.

22. A composition for treatment of a retinal disease mediated by abnormal vascularization comprising

a) an anti-sense nucleic acid sequence directed against vascular endothelial growth factor (VEGF), and

b) hyaluronic acid,

together with a pharmaceutically-acceptable carrier.

23. A composition according to Claim 22, in which the anti-sense nucleic acid sequence is present in a vector

comprising a nucleic acid sequence to be transferred into a targ t cell.

24. A composition according to Claim 23, in which th vector is a virus.

25. A composition according to Claim 24, in which the virus is an adenovirus, an adeno-associated virus, a herpes virus or a retrovirus.

26. A composition according to Claim 24 or Claim 25, in which the viral vector is a replication-defective recombinant virus.

27. A composition according to Claim 26, where the virus is a replication-defective adenovirus comprising a promoter selected from the group consisting of respiratory syncytial virus promoter, cytomegalovirus promoter, adenovirus major late protein (MLP), VA1 pol III and β-actin promoters.

28. A composition according to Claim 27, wherein th vector is pAd.RSV, pAd.MLP or pAd.VA1.

29. A composition according to Claim 27, wherein th vector is Ad.RSV.αVEGF or Ad.VA1.αVEGF.

30. A composition according to any one of Claims 1 to 29, wherein the vector also comprises a polyadenylation signal sequence.

31. A composition according to Claim 30, wherein the polyadenylation signal sequence is the SV40 signal sequence.

32. A composition for treatment of a retinal disease mediated by abnormal vascularization, comprising an anti-sense nucleic acid sequence corresponding to at least a part of the sequence encoding VEGF, and optionally further comprising one or more adjuvants for increasing cellular uptake, together with a pharmaceutically-acceptable carrier.

33. A composition according to Claim 32, wherein the anti-sense sequence has 100% complementarity to a corresponding region of the gene encoding VEGF.

34. A composition for short-term treatment according to Claim 32 or Claim 33, wherein the anti-sens sequence is 16 to 50 nucleotides long.

35. A composition for short-term treatment according to Claim 34, wherein the anti-sense sequence is 16 to 22 nucleotides long.

36. A composition for short-term treatment according to Claim 35, wherein the anti-sense sequence is 16 to 19 nucleotides long.

37. A composition according to Claim 33, wherein a modified oligonucleotide as herein defined is used, and the anti-sense sequence is 7 to 50 nucleotides long.

38. A composition according to any one of Claims 32 to 37 wherein the adjuvant is hyaluronic acid or a derivative thereof.

39. A composition for long-term treatment of a retinal disease mediated by abnormal vascularization, comprising a recombinant virus comprising an anti-sense nucleic acid sequence corresponding to at least part of the sequence encoding VEGF, together with a pharmaceutically-acceptable carrier, wherein the anti-sense sequence is between 20 nucleotides in length and the full length sequence encoding VEGF.

40. A composition according to Claim 39, wherein the anti-sense sequence is between 50 nucleotides long and the full length sequence of VEGF.

41. A composition according to any one of Claims 1 to 40, wherein the VEGF sequence is that of VEGF from human retinal pigment epithelial cells or choroidal endothelial cells.

42. A composition for treatment of a retinal disease mediated by abnormal vascularization, wherein said treatment is effective for an indefinite period, comprising a virus comprising an anti-sense DNA corresponding to at least part of the sequence encoding VEGF, together with a pharmaceutically-acceptable carrier, wherein said virus is one capable of integrating the anti-sense sequence into the

genome of the target cell.

43. A composition according to Claim 42, wherein the virus is an adeno-associated virus.

44. A composition according to Claim 42 or Claim 43, wherein the anti-sense sequence is between 20 nucleotides long and the full length sequence of VEGF.

45. A composition according to Claim 44, wherein the anti-sense sequence is between 50 nucleotides long and the full length sequence of VEGF.

46. A method of treatment of a retinal disease mediated by abnormal neovascularization, comprising the step of administering an effective amount of an anti-sense nucleic acid sequence corresponding to at least part of the sequence encoding VEGF into the eye(s) of a subject in need of such treatment, thereby to inhibit neovascularization.

47. A method according to Claim 46, wherein the anti-sense sequence is 16 to 50 nucleotides long.

48. A method according to Claim 46, wherein the anti-sense sequence is 16 to 22 nucleotides long.

49. A method according to Claim 46, wherein the anti-sense sequence is 16 to 19 nucleotides long.

50. A method according to Claim 46, wherein a modified oligonucleotide as herein defined is used, and the anti-sense sequence is 7 to 50 nucleotides long.

51. A method of treatment of a retinal disease mediated by abnormal neovascularization, comprising the step of administering an effective amount of a composition according to any one of Claims 22 to 45 to a subject in need of such treatment.

52. A method of treatment of a retinal disease mediated by abnormal neovascularization, comprising the step of administering a composition according to any one of Claims 39 to 41 to the eye(s) of a subject in need of such treatment, thereby to inhibit neovascularization in the long term.

53. A method of treatment of a retinal disease mediated by abnormal neovascularization, comprising the

step of administering an effective amount of a composition according to Claims 42 to 45 into the eye(s) of a subject in need of such treatment, thereby to inhibit neovascularization for an indefinite period.

54. A method according to any one of Claims 46 to 53, wherein the retinal disease is selected from the group consisting of age-related macular degeneration, diabetic retinopathy, branch or central retinal vein occlusion, retinopathy of prematurity, rubeosis iridis and corneal neovascularization.

55. A method of promoting uptake of an exogenous nucleic acid sequence by a target cell, comprising the step of exposing the cell to the nucleic acid, or to a virus or vector comprising the nucleic acid, in the presence of a hyaluronic acid or a derivative thereof.

56. A method according to Claim 55, in which the target cell is a phagocytic cell.

57. A method according to Claim 55 or Claim 56, in which the nucleic acid and hyaluronic acid are administered together *in vitro*.

58. A method according to Claim 55 or Claim 56, in which the nucleic acid and hyaluronic acid are administered together *in vivo*.

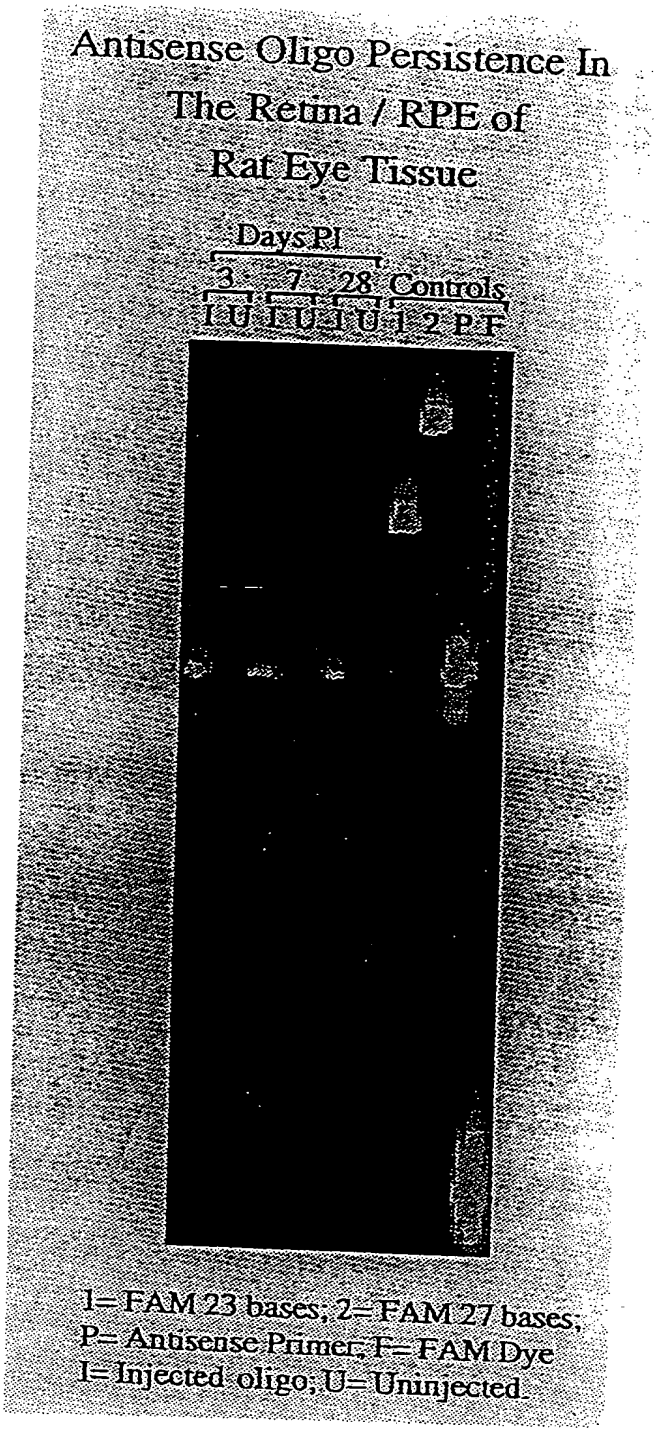

Antisense Oligo Persistence In The Retina / RPE of Rat Eye Tissue
Days PI
3
7
28
Controls
I U I U 3 U 1 2 P F
1= FAM 23 bases; 2= FAM 27 bases;
P= Antisense Primer; F= FAM Dye
I= Injected oligo; U= Uninjected

FIGURE 1a

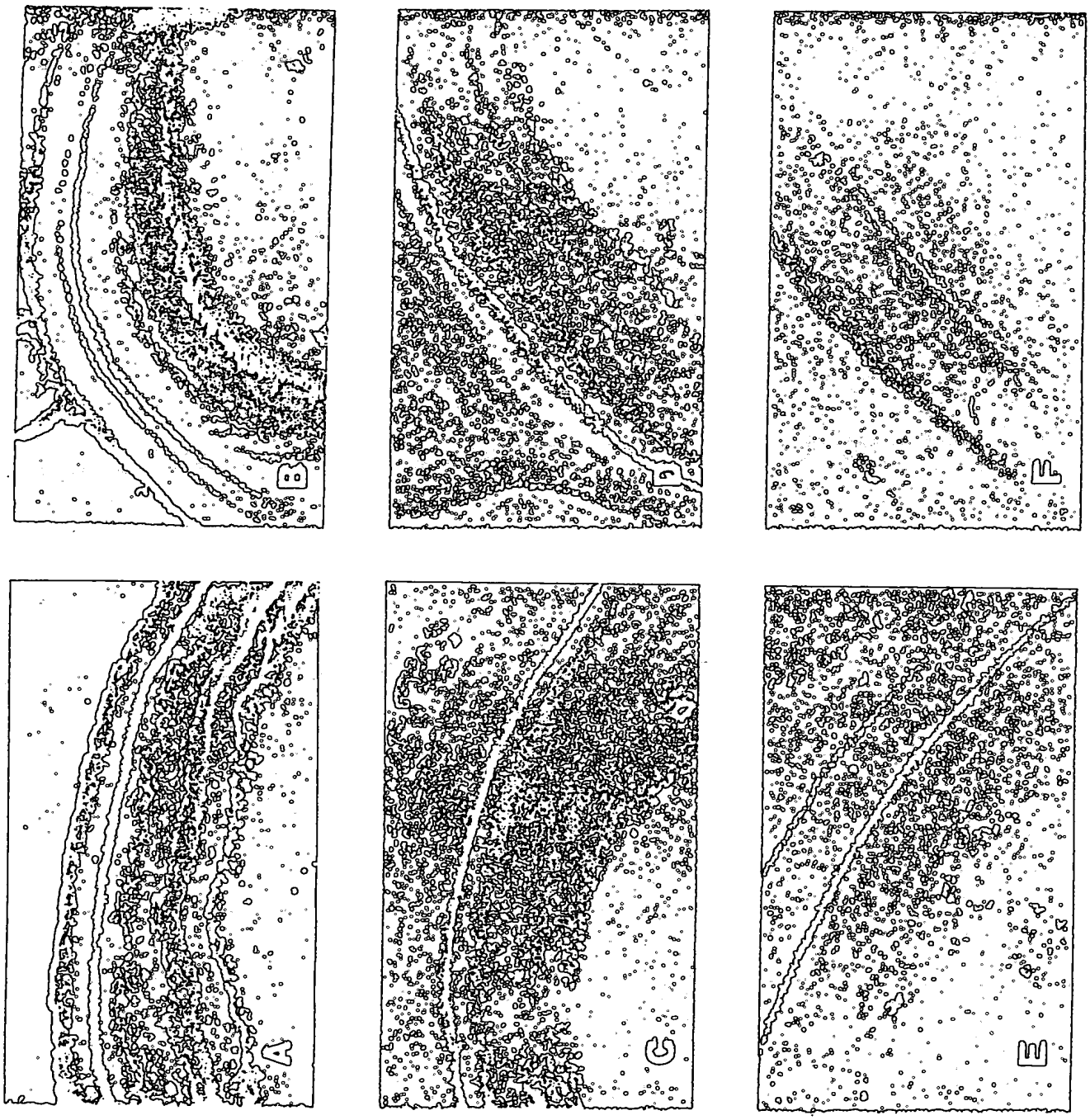


FIGURE 1b

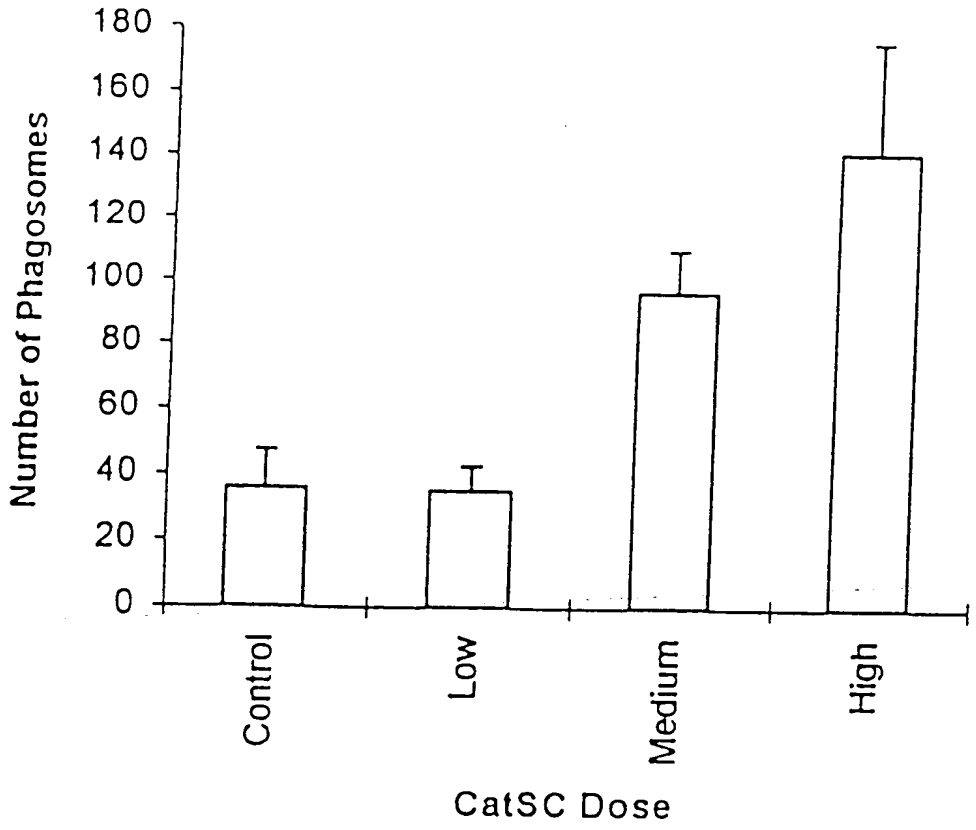

180
160
140
120
100
80
60
40
20
0
Number of Phagosomes
Control
Low
Medium
High
CatSC Dose

FIGURE 2

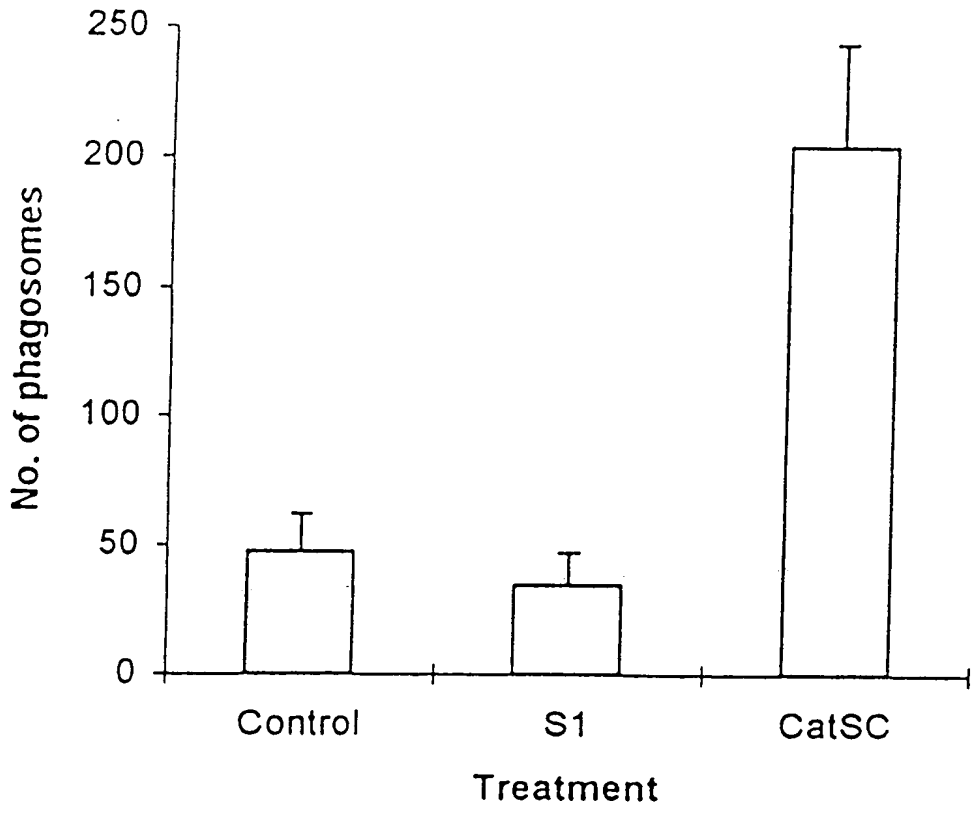

250
200
150
100
50
0
No. of phagosomes
Control
S1
CatSC
Treatment

FIGURE 3

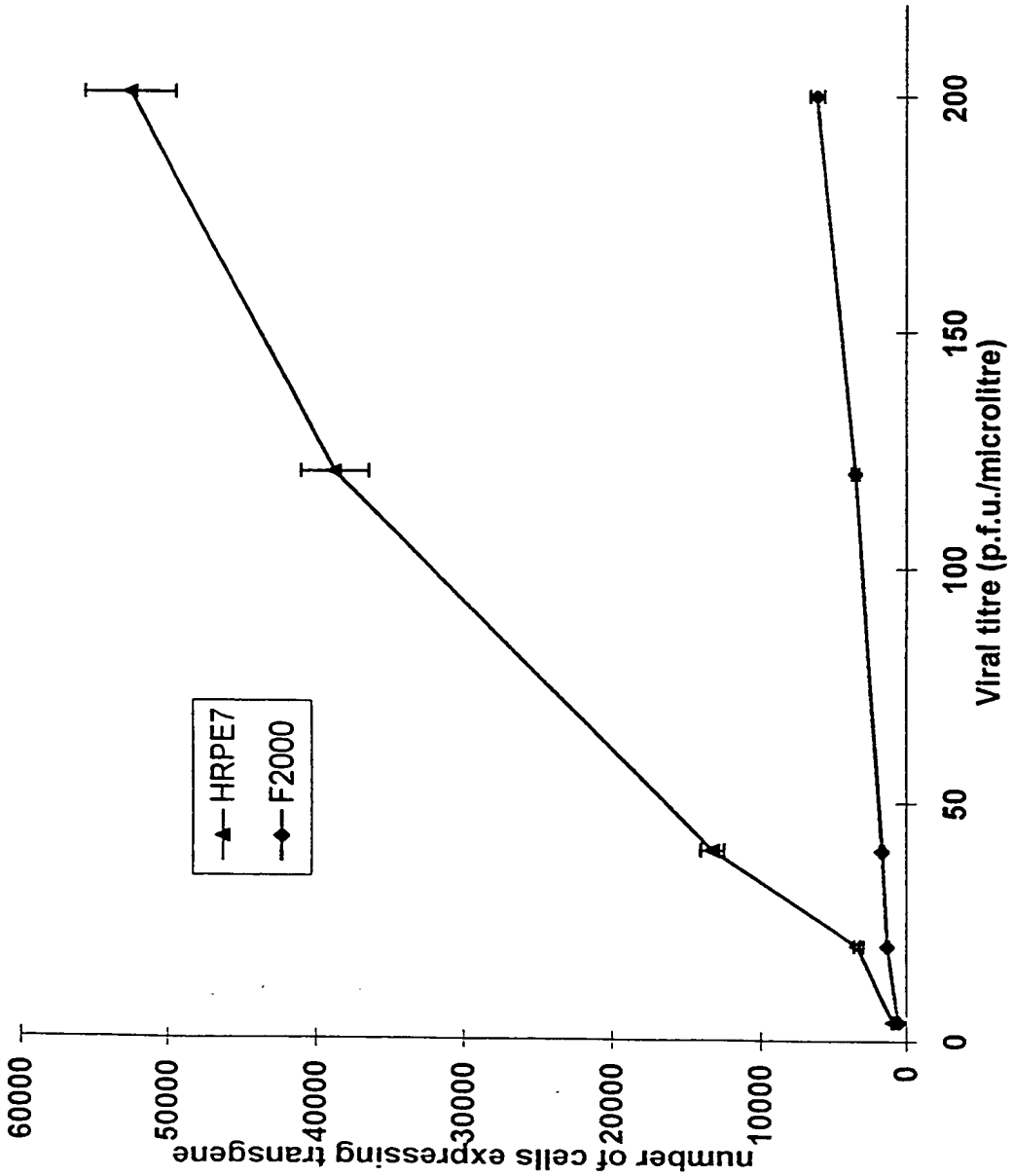

number of cells expressing transgene
60000
50000
40000
30000
20000
10000
0
0
50
100
150
200
Viral titre (p.f.u./microlitre)
HRPE7
F2000

FIGURE 4

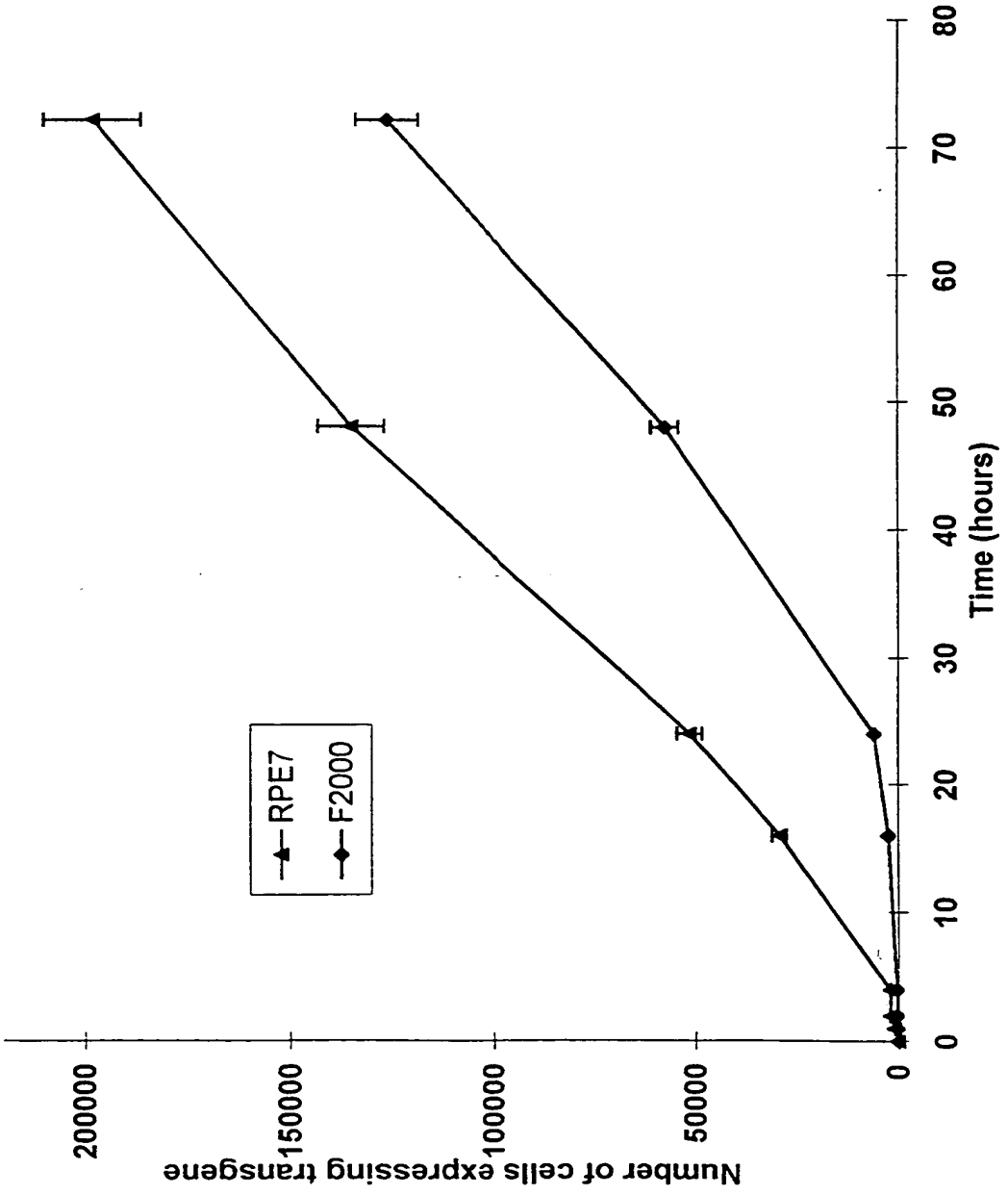

Number of cells expressing transgene
200000
150000
100000
50000
0
0
10
20
30
40
50
60
70
80
Time (hours)
RPE7
F2000

FIGURE 5

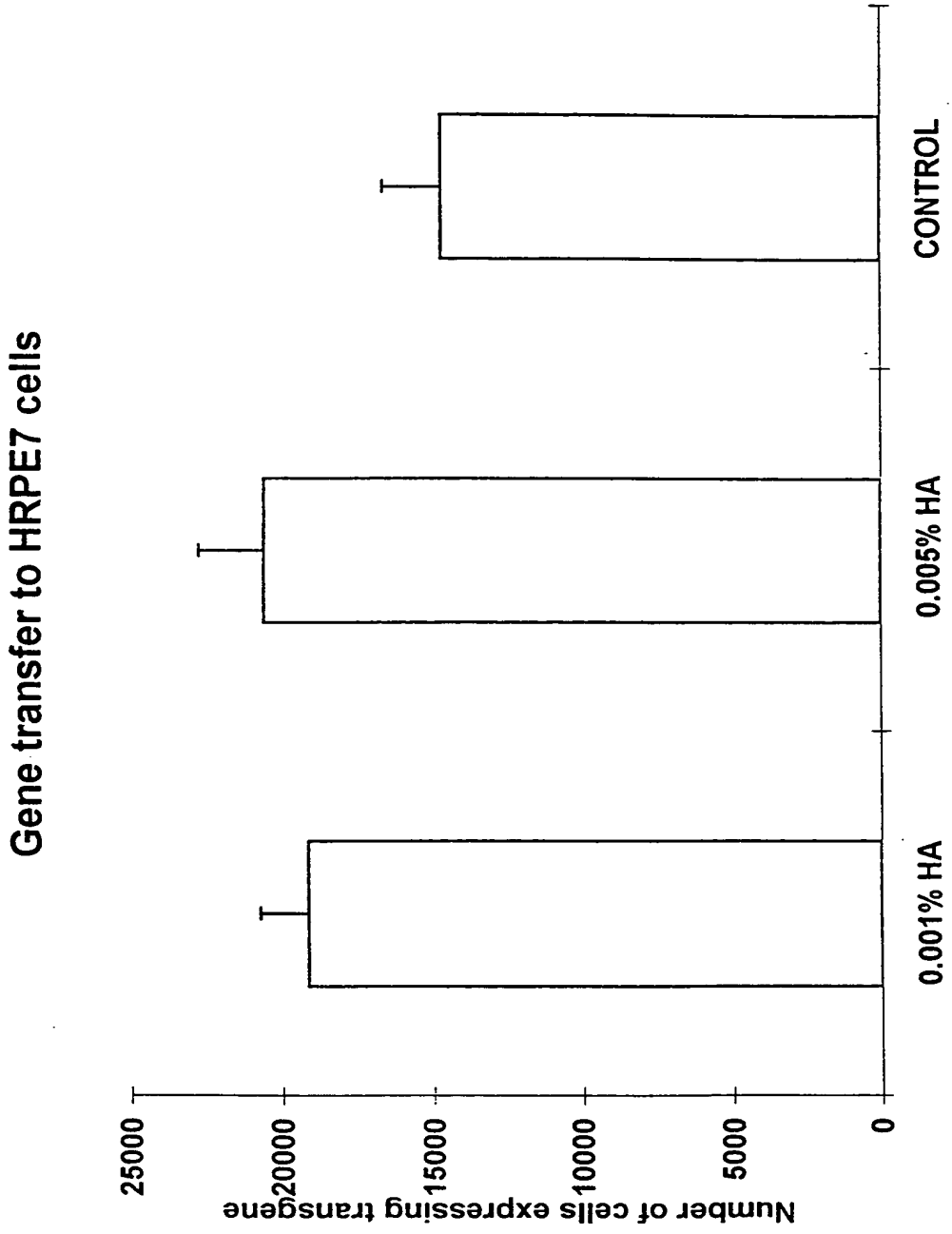

Gene transfer to HRPE7 cells
Number of cells expressing transgene
25000
20000
15000
10000
5000
0
CONTROL
0.005% HA
0.001% HA

FIGURE 6

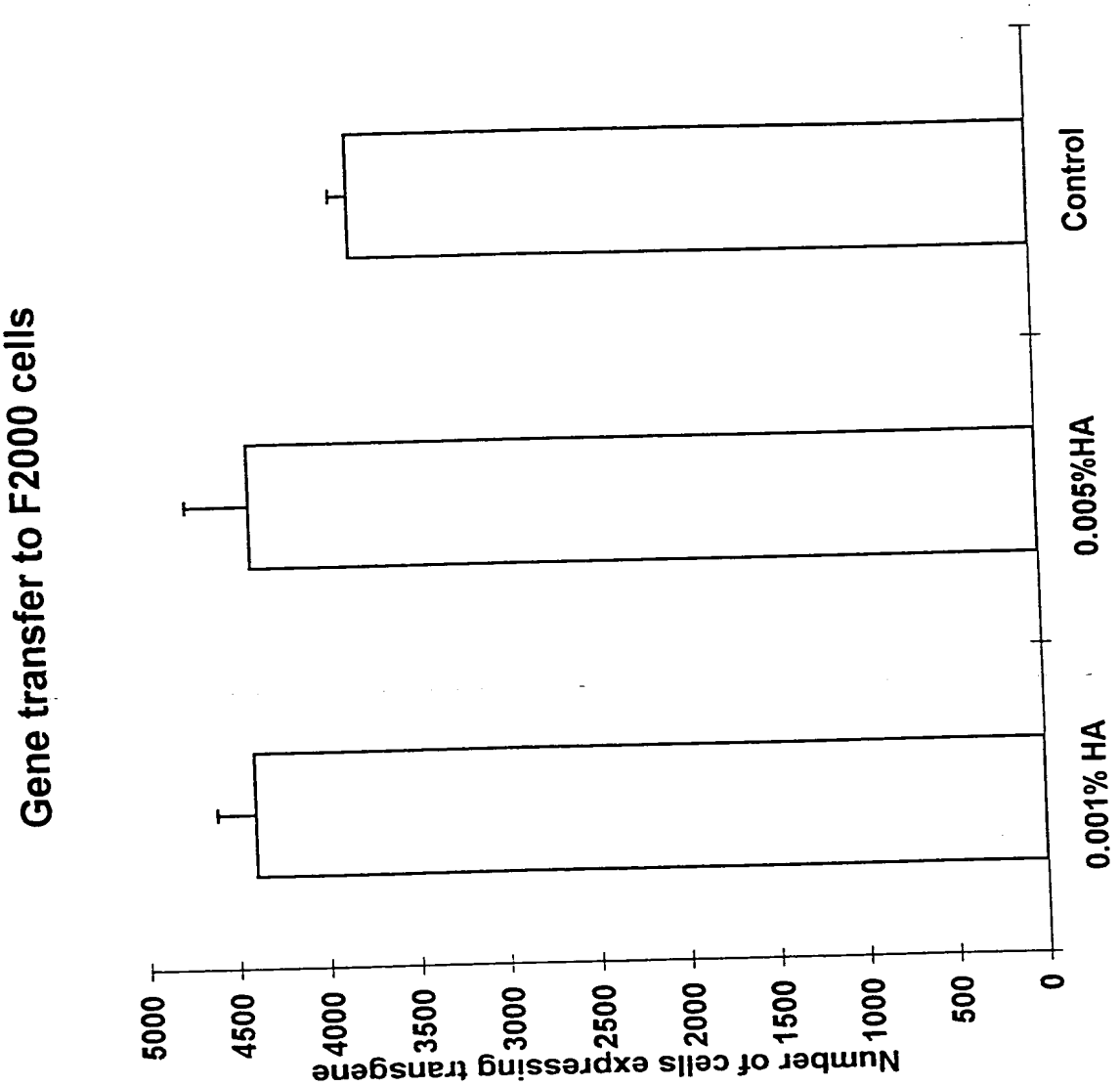

Gene transfer to F2000 cells
Number of cells expressing transgene
5000
4500
4000
3500
3000
2500
2000
1500
1000
500
0
Control
0.005%HA
0.001% HA

FIGURE 7

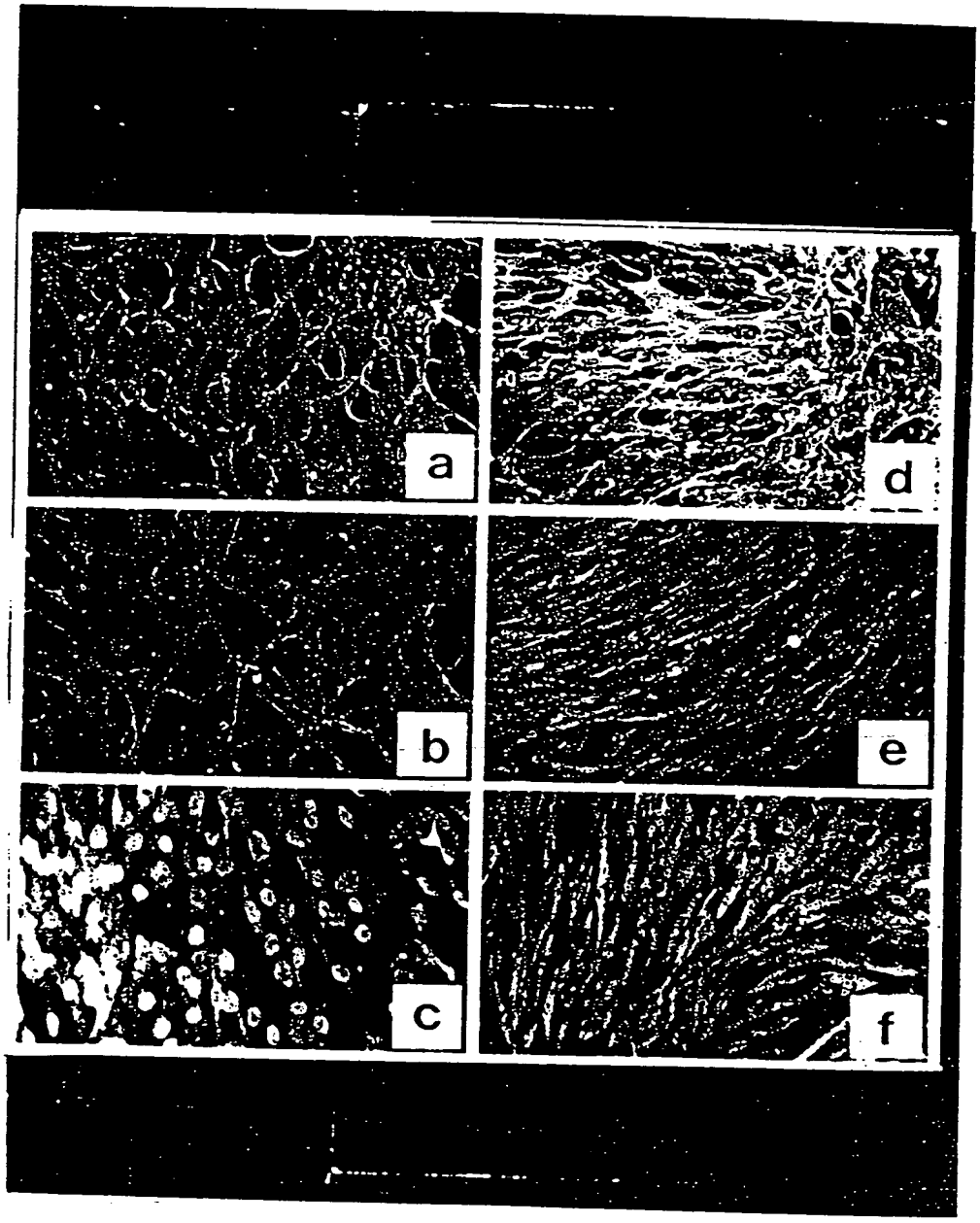


FIGURE 8

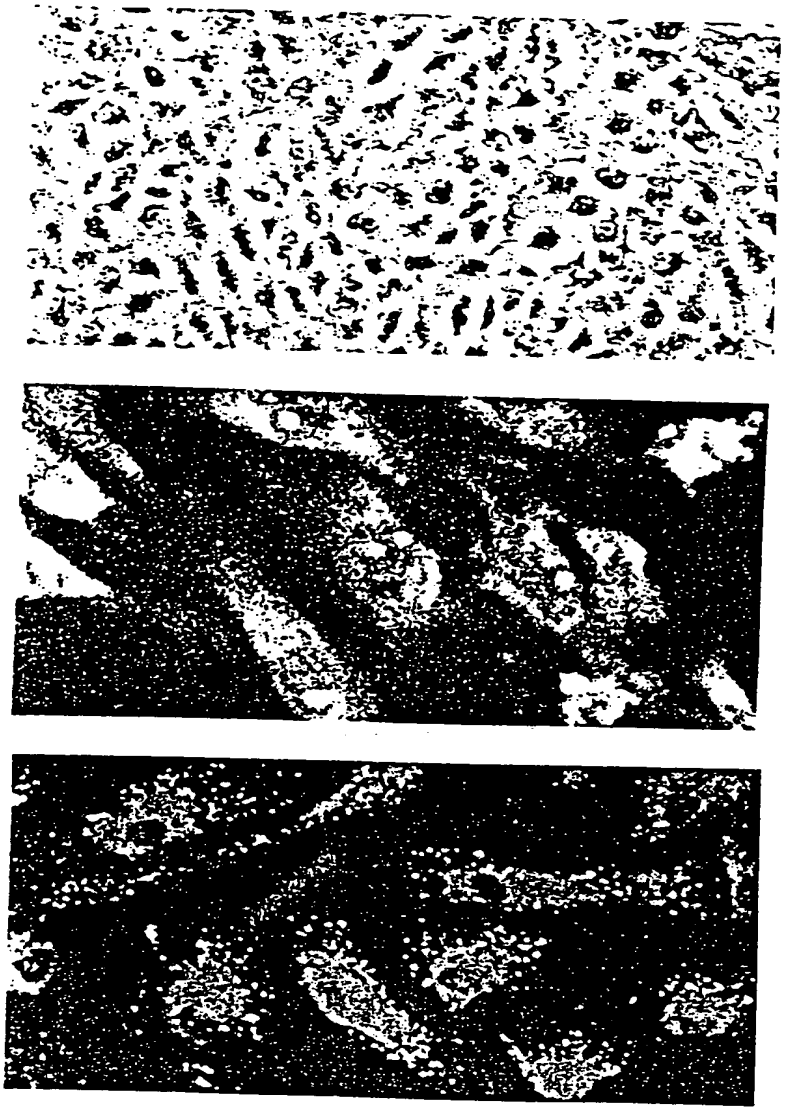


FIGURE 9

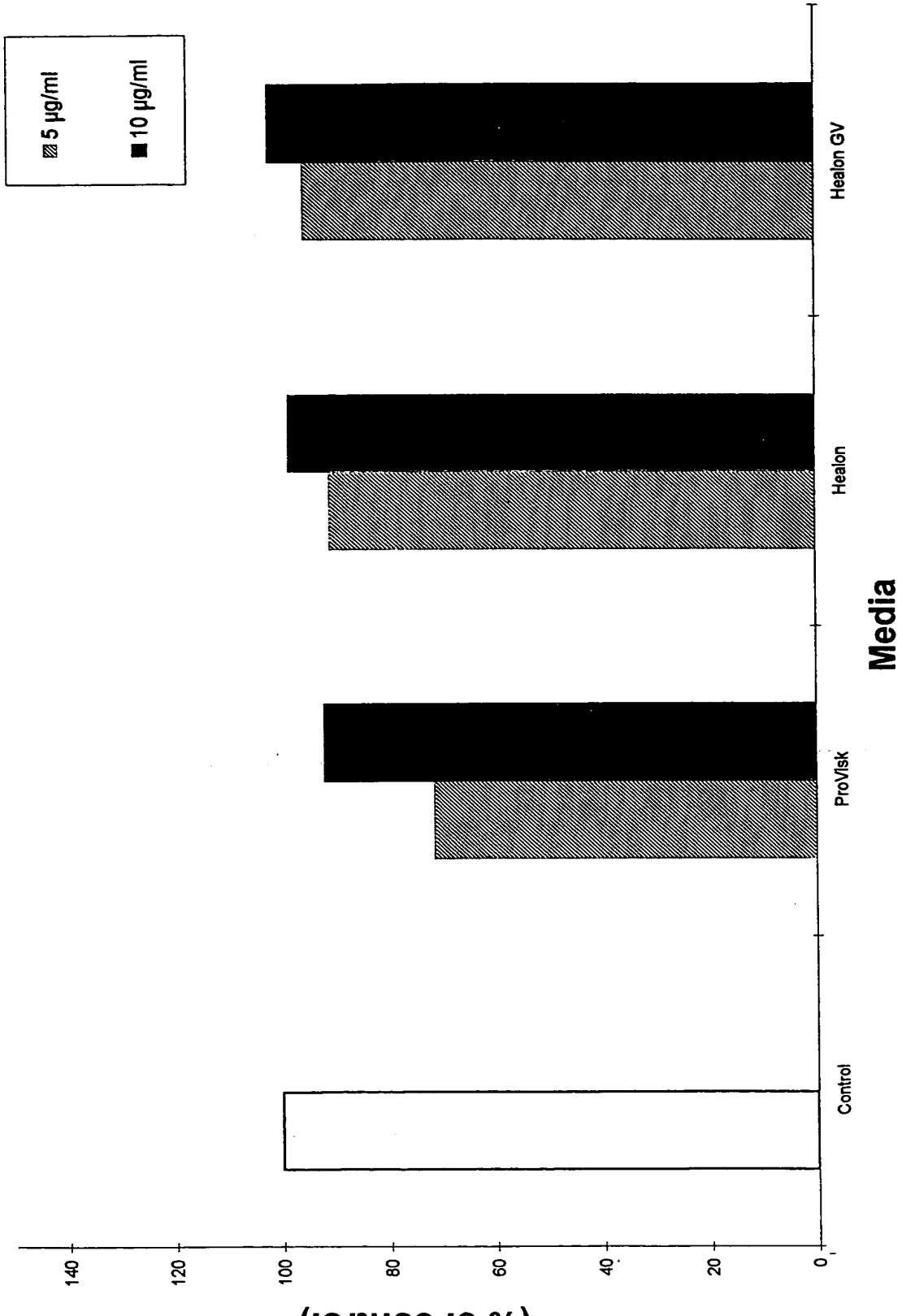

5 µg/ml
10 µg/ml
Healon GV
Healon
ProVisk
Control
Media
Tube area
(% of control)
140
120
100
80
60
40
20
0

FIGURE 10

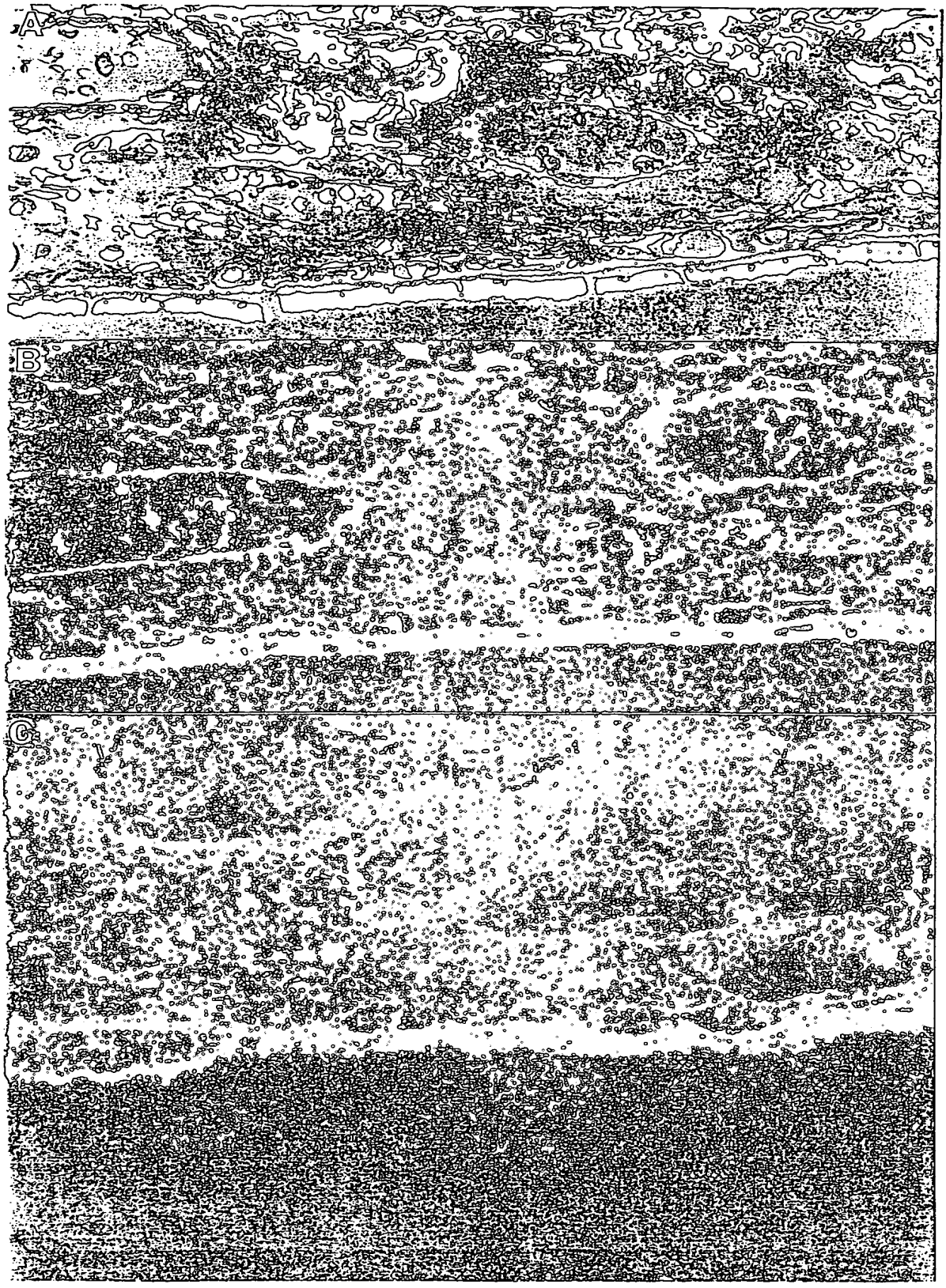
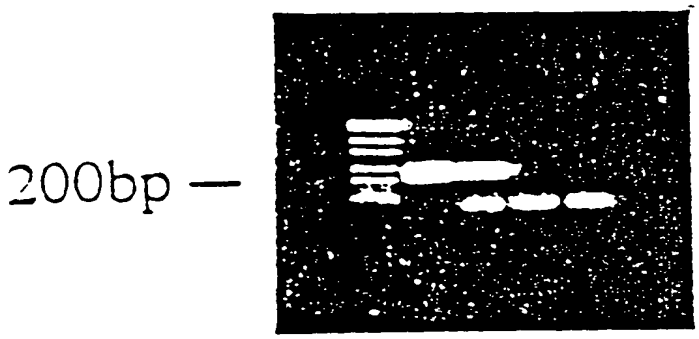


FIGURE 11

A



B

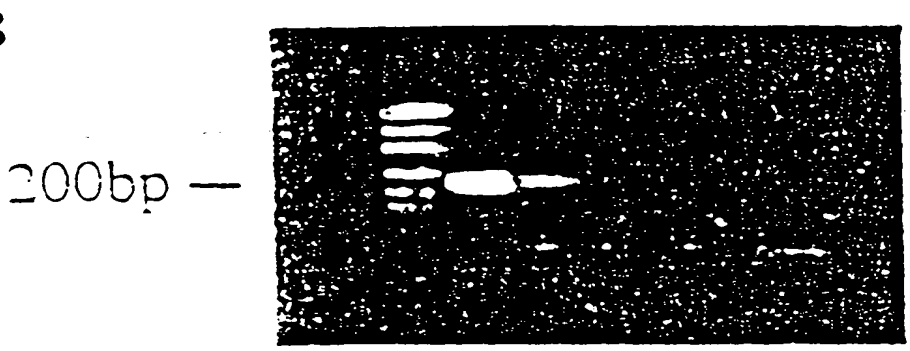


FIGURE 12

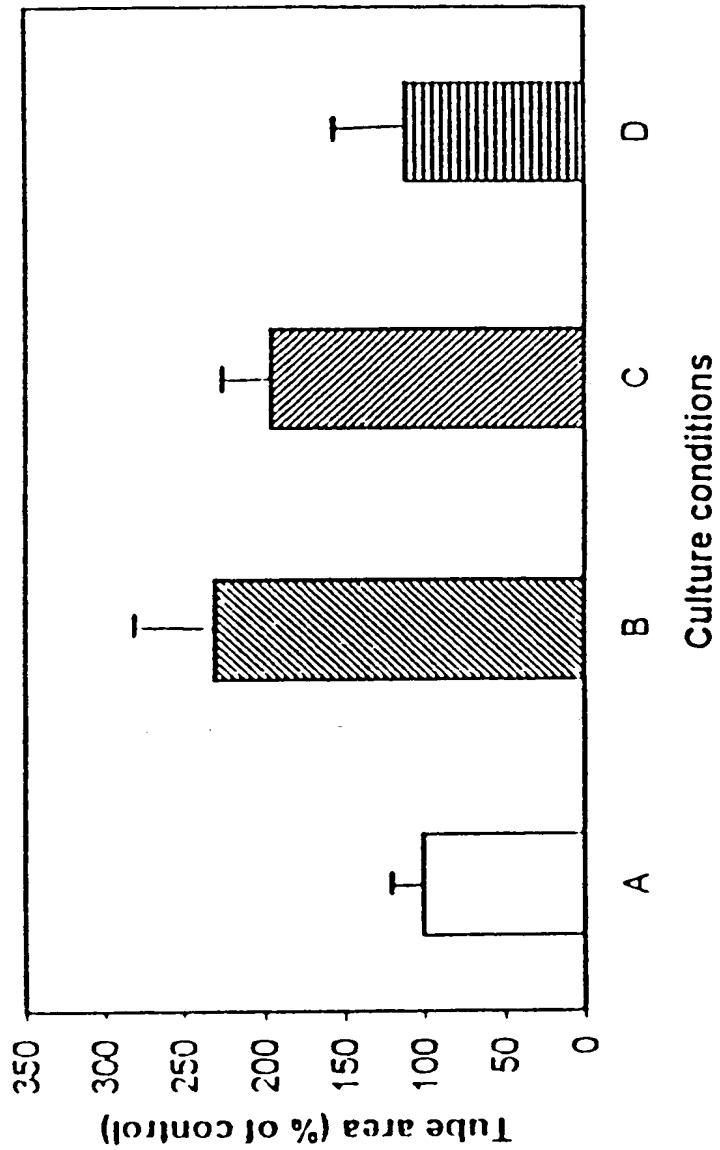

Tube area (% of control)
350
300
250
200
150
100
50
0
A
B
C
D
Culture conditions

FIGURE 13

INTERNATIONAL SEARCH REPORT

International Application No.
PCT/AU 96/00664

A. CLASSIFICATION OF SUBJECT MATTER

Int Cl[6]: A61K 47/36 A61K 48/00

According to International Patent Classification (IPC) or to both national classification and IPC

B. FIELDS SEARCHED

Minimum documentation searched (classification system followed by classification symbols)
Key words as for {B49}

Documentation searched other than minimum documentation to the extent that such documents are included in the fields searched
AU IPC A61K 47/36; 48/00

Electronic data base consulted during the international search (name of data base and, where practicable, search terms used)
DERWENT, JAPIO, CA, BIOTEC, MEDLINE
Nucleic()acid and hyaluronic()acid
VEGF and antisense

C. DOCUMENTS CONSIDERED TO BE RELEVANT

Category*	Citation of document, with indication, where appropriate, of the relevant passages	Relevant to claim No.
X	WO-A-90/02774 (PIER AUGE) 22 March 1990 Claim 1	1
Y	AU-A-60903/86 (BIOMATRIX) 5 August 1986 Particularly pages 4-5	1-31, 55-58
Y	AU-A-52274/93 (NORMPHARM CO. INC) 3 March 1994 Particularly pages 17-19	1-31, 55-58

[X] Further documents are listed in the continuation of Box C

[X] See patent family annex

* Special categories of cited documents:

"A" document defining the general state of the art which is not considered to be of particular relevance

"E" earlier document but published on or after the international filing date

"L" document which may throw doubts on priority claim(s) or which is cited to establish the publication date of another citation or other special reason (as specified)

"O" document referring to an oral disclosure, use, exhibition or other means

"P" document published prior to the international filing date but later than the priority date claimed

"T" later document published after the international filing date or priority date and not in conflict with the application but cited to understand the principle or theory underlying the invention

"X" document of particular relevance; the claimed invention cannot be considered novel or cannot be considered to involve an inventive step when the document is taken alone

"Y" document of particular relevance; the claimed invention cannot be considered to involve an inventive step when the document is combined with one or more other such documents, such combination being obvious to a person skilled in the art

"&" document member of the same patent family

Date of the actual completion of the international search	Date of mailing of the international search report
6 January 1997	31 JAN 1997
Name and mailing address of the ISA/AU AUSTRALIAN INDUSTRIAL PROPERTY ORGANISATION PO BOX 200 WODEN ACT 2606 AUSTRALIA Facsimile No.: (06) 285 3929	Authorized officer **R.L. POOLEY** Telephone No.: (06) 283 2242

INTERNATIONAL SEARCH REPORT

International Application No.
PCT/AU 96/00664

C (Continuation) DOCUMENTS CONSIDERED TO BE RELEVANT

Category*	Citation of document, with indication, where appropriate, of the relevant passages	Relevant to claim No.
X, P	WO-A-96/23065 (Hybridon Inc) 1 August 1996 Whole document	32-54
X Y	WO-A-95/04142 (Hybridon Inc) 9 February 1995 Whole document	32-54 22-31
X, P	WO-A-96/00286 (TOAGOSEI Co Ltd) 4 January 1996 Page 35	32-54
X, P	WO-A-96/27006 (Hybridon Inc) 6 September 1996 Whole document	32-54
Y	WO-A-92/13063 (Oncogene Science) 6 August 1992 Page 31, lines 17-30	32-54
Y	Uhlman and Peyman "Antisense Oligo nucleotides" Chemical Reviews 1990 Vol. 90 No. 4 pages 544-579	22-31, 32-54

INTERNATIONAL SEARCH REPORT

...ernational Application No.
PCT/AU 96/00664

Box 1 Observations where certain claims were found unsearchable (Continuation of item 1 of first sheet)

This International Search Report has not been established in respect of certain claims under Article 17(2)(a) for the following reasons:

1. ☐ Claims Nos.:
because they relate to subject matter not required to be searched by this Authority, namely:

2. ☐ Claims Nos.:
because they relate to parts of the international application that do not comply with the prescribed requirements to such an extent that no meaningful international search can be carried out, specifically:

3. ☐ Claims Nos.:
because they are dependent claims and are not drafted in accordance with the second and third sentences of Rule 6.4(a)

Box II Observations where unity of invention is lacking (Continuation of item 2 of first sheet)

This International Searching Authority found multiple inventions in this international application, as follows:

Claims 1-31 and 55-58 are to compositions and treatments comprising hyaluronic acid and nucleic acids. Claims 32-54 are to compositions and treatments comprising nucleic acids without hyaluronic acid as an essential component.

1. ☒ As all required additional search fees were timely paid by the applicant, this international search report covers all searchable claims
2. ☐ As all searchable claims could be searched without effort justifying an additional fee, this Authority did not invite payment of any additional fee.
3. ☐ As only some of the required additional search fees were timely paid by the applicant, this international search report covers only those claims for which fees were paid, specifically claims Nos.:
4. ☐ No required additional search fees were timely paid by the applicant. Consequently, this international search report is restricted to the invention first mentioned in the claims; it is covered by claims Nos.:

Remark on Protest

☐ The additional search fees were accompanied by the applicant's protest.

☒ No protest accompanied the payment of additional search fees.

INTERNATIONAL SEARCH REPORT

Information on patent family members

International Application No.
PCT/AU 96/00664

This Annex lists the known "A" publication level patent family members relating to the patent documents cited in the above-mentioned international search report. The Australian Patent Office is in no way liable for these particulars which are merely given for the purpose of information.

Patent Document Cited in Search Report		Patent Family Member					
WO	90/02774	EP	386216	AU	42171/89	US	5194253
AU	60903/86	EP	224987	US	5128326		
AU	52274/93	EP	445255	EP	656213	WO	91/04058
WO	96/23065	AU	49074/96				
WO	95/04142	EP	716688				
WO	96/27006	AU	51791/96				
WO	96/00286	JP	8070899				
WO	92/13063	AU	14692/92				

END OF ANNEX

GRIFFITH HACK

PATENT AND TRADE MARK ATTORNEYS

MELBOURNE OFFICE
509 ST KILDA ROAD, MELBOURNE VIC 3004, AUSTRALIA

Correspondence to:
GPO BOX 1285K, MELBOURNE VIC 3001, AUSTRALIA
TELEPHONE (03) 9243 8300 TELEX 30921
FACSIMILE + 61-3 9243 8333 / 9243 8334
EMAIL ghack@peg.apc.org

12 January 1998

The Commissioner of Patents

Sir

IN THE MATTER OF International Patent Application No. PCT/AU96/00664 in the name of HYAL PHARMACEUTICAL AUSTRALIA LIMITED
Our Ref: VS:LM:FP4167

We refer to the second Written Opinion dated 13 November 1997 issued by the International Preliminary Examining Authority in respect of this application. The time for response has been extended to 13 January 1998.

The Examiner has objected to claims 1, 17, 19 and 21 in the light of Australian patent application no. 42171/89. As pointed out in the previous response, the citation merely discloses the use of a topical cosmetic composition, comprising a DNA salt of high molecular weight together with an alkaline or ammonium salt of hyaluronic acid and a hydrophilic film-forming polymer. It is perfectly evident from a fair reading of the cited specification as a whole that the high molecular weight DNA means DNA of greater than 24,000 base pairs. This is evident from the method of preparation of the DNA (see page 3 of the citation). The hyaluronic acid is used to provide slow, non-toxic release of DNA from the mask; there is no disclosure or suggestion at all that the hyaluronic acid acts to improve uptake of DNA into cells. Indeed there is no evidence at all that DNA is taken into cells.

More particularly, the sequence of the nucleic acid is completely unspecified; the DNA used is merely a mixture selected on the basis of molecular weight, and it does not encode any particular protein, let alone one exerting a specific biological effect. It is submitted that the amendment previously made to claim 1 does in fact clearly distinguish from the citation, in that it specifies that the claimed nucleic acid sequence is an anti-sense nucleic acid or a sense nucleic acid encoding a desired protein. The citation in no way discloses or suggests that any of the DNA is of an anti-sense sequence, nor that it encodes any specific protein. Further amendment is proposed in order to clarify this point. It is submitted that claim 1 is now clearly distinguished from the citation.

In response to maintenance of the citation of WO 95/04142, claim 38 has been renumbered as claim 33 and amended to specify that the composition comprises as adjuvant hyaluronic acid or a derivative thereof. Corresponding new claims dependent respectively on claims 39, 42

(renumbered as claim 43) and 46 (renumbered as claim 48) have been added. The arguments in the previous response are maintained.

WO 95/04142 discloses the use of viruses for introduction of DNA into target cells. The citation does not suggest that recombinant viruses can be used for *in situ* production of anti-sense sequences, or for integration of an anti-sense sequence into the genome of the target cell, contrary to the Examiner's assertion. In contrast, the present specification clearly states that viruses are used for production of anti-sense DNA within the target cell, as set out at page 14, paragraph 3, and to facilitate integration of an anti-sense construct into the cellular genome (page 14, paragraph 4). These uses of viruses go far beyond their mere application as delivery agents.

Similarly, we maintain our comments regarding the citation on a whole contents basis of WO 96/23065 and WO 96/27006. For the Examiner's information, we enclose a list of oligonucleotides which are used for the purposes of the present invention, which target the regulatory elements of the VEGF gene. These are representative only; the position of the targeting sequences may be moved upstream or downstream by up to 15 bases.

None of the Hybridon specifications discloses or suggests any *modified* oligonucleotide, and therefore claim 37 (now claim 38) is clearly distinguished from the citations.

The Examiner has maintained the citation as a prior filed but later published document of WO 96/00286, on the basis of the abstract alone, since she does not have access to an English-language text of the complete specification. It is again pointed out that the Examiner is unable to state that this reference discloses each and every one of the features of claims 32 to 54. The PCT abstract discloses "an anti-sense nucleic acid compound which has a base sequence complementary to the sequence of at least eight consecutive bases in the base sequence of a gene coding for an endothelial cell growth factor and has the effect of inhibiting the expression of the growth factor; therapeutic and diagnostic agents to cancer, rheumatoid arthritis, diabetes, etcs., both containing the above compound as the active ingredients; and a method of inhibiting the expression of an endothelial cell growth factor by using the above anti-sense nucleic acid compounds." There is no disclosure or suggestion of use of such a compound for treatment of a retinal disease mediated by abnormal vascularisation. As shown by the enclosed extract from Stedman's Medical Dictionary, insulin-dependent diabetes mellitus is a hypoglycaemic condition caused by insulin deficiency. Retinopathy is a late complication, which occurs only in some patients. Moreover, abnormal vascularisation may result from a number of conditions other than diabetes, as is clearly evident from the body of the present specification.

The term "endothelial cell growth factor" is a generic expression which refers to any factor which can promote the growth or metabolism of endothelial cells. Thus this term is not restricted to *vascular* endothelial growth factor (VEGF); it can encompass any one of a number of factors, including members of the VEGF family, such as platelet-derived growth factor. Thus it is submitted that two of the essential features of original claims 32 to 45 are not present

in the abstract; nor is there any disclosure or suggestion in the abstract of any adjuvant, let alone hyaluronic acid. As discussed in the previous response, although VEGF is referred to in the body of the cited specification, notably in the table at page 35, it is not possible to say without having a full translation in what context these references are made. Moreover, as previously pointed out, some of the nucleotide sequences in the table at page 35 have no homology with the VEGF sequence. It is again respectfully submitted that this citation should be withdrawn.

Appropriate amendment is proposed in response to the observation in Box VIII.

The Examiner asserts in the supplemental box that the amendments to incorporate the two new figures and examples go beyond the disclosure in the application as filed. It is respectfully pointed out that pAd. VA1 and Ad. VA1.aVEGF are preferred replication-defective adenovirus vectors according to the invention, and are claimed in original claims 13 and 28 and claims 14 and 29 respectively as well as being referred to in the specification at page 15, lines 23-26. Example 19, which describes expression of VEGF Antisense mRNA fragments in pVA1 is therefore clearly fairly based on the original disclosure.

Similarly, the specification as lodged discusses the mechanism of neovascularisation in ocular diseases, and refers specifically to up-regulation of VEGF mRNA transcription by hypoxia at page 4, lines 7 to 16. Consequently, example 20 identifies target sites for anti-sense VEGF sequences of the invention *within the known VEGF sequence* which are specifically relevant to hypoxia or which are otherwise relevant to transcriptional regulation; these are also clearly fairly based on the disclosure.

Substitute pages 12, 13, and 60, 60a, 62-65 are lodged herewith, together with working copies indicating the nature and location of the proposed amendments.

Favourable reconsideration is respectfully requested.

Yours respectfully

Stedman's
MEDICAL DICTIONARY

25th Edition

ILLUSTRATED

1990

WILLIAMS & WILKINS
Baltimore • Hong Kong • London • Sydney

tration of alloxan, which damages the insulin-producing islet cells of the pancreas.

brittle d., d. in which there are marked fluctuations in blood glucose concentrations which are difficult to control.

bronze d., d. associated with hemochromatosis, with iron deposits in the skin, liver, pancreas, and other viscera, often with severe liver damage and glycosuria.

calcinuric d., hypercalciuria.

chemical d., latent d.

galactose d., galactosemia.

growth-onset d., insulin-dependent d. mellitus.

d. in'nocens, renal *glycosuria*.

d. insip'idus, chronic excretion of very large amounts of pale urine of low specific gravity, causing dehydration and extreme thirst; ordinarily results from inadequate output of pituitary antidiuretic hormone; may be mimicked as a result of excessive fluid intake, as in psychogenic polydipsia. See also nephrogenic d. mellitus.

insulin-dependent d. mellitus (IDDM), type I diabetes; juvenile- or growth-onset d.; severe d. mellitus, often brittle, usually of abrupt onset during the first two decades of life but can develop up to age 40; characterized by polydipsia, polyuria, increased appetite, weight loss, low plasma insulin levels, and episodic ketoacidosis; insulin therapy and dietary regulation are mandatory.

insulinopenic d., any form of d. mellitus resulting from inadequate secretion of insulin.

d. intermit'tens, d. mellitus in which there are periods of relatively normal carbohydrate metabolism followed by relapses to the previous diabetic state.

juvenile-onset d., insulin-dependent d. mellitus.

latent d., chemical d.; a mild form of d. mellitus in which the patient displays no overt symptoms, but displays certain abnormal responses to diagnostic procedures, such as an elevated fasting blood glucose concentration or reduced glucose tolerance.

lipoatrophic d., lipoatrophy.

lipogenous d., d. and obesity combined.

maturity-onset d., non-insulin-dependent d. mellitus.

d. mel'litus [L. sweetened with honey], a metabolic disease in which carbohydrate utilization is reduced and that of lipid and protein enhanced; it is caused by an absolute or relative deficiency of insulin and is characterized, in more severe cases, by chronic hyperglycemia, glycosuria, water and electrolyte loss, ketoacidosis, and coma; long-term complications include development of neuropathy, retinopathy, nephropathy, generalized degenerative changes in large and small blood vessels, and increased susceptibility to infection. See also insulin-dependent d. mellitus; non-insulin-dependent d. mellitus.

metahypophysial d., (1) d. mellitus caused by large quantities of endogenous or exogenous pituitary growth hormone; (2) term used to designate the irreversible phase of d. in acromegaly.

Mosler's d., inosituria with excretion of large quantities of water.

nephrogenic d. insipidus, vasopressin-resistant d.; d. insipidus due to inability of the kidney tubules to respond to antidiuretic hormone; X-linked inheritance, with full expression in males and partial defect in heterozygous females.

non-insulin dependent d. mellitus (NIDDM), type II d.; adult- or maturity-onset d.; an often mild form of d. mellitus of gradual onset, usually in obese individuals over age 35; absolute plasma insulin levels are normal to high, but relatively low in relation to plasma glucose levels; ketoacidosis is rare, but hyperosmolar coma can occur; responds well to dietary regulation and/or oral hypoglycemic agents, but diabetic complications and degenerative changes can develop.

pancreatic d., (1) d. demonstrably dependent upon a pancreatic lesion; (2) d. following removal of the pancreas in an animal.

phloridzin d., marked glycosuria without hyperglycemia following the experimental administration of phloridzin, which impairs renal tubular reabsorption of glucose.

phosphate d., excessive secretion of phosphate in the urine due to a defect in tubular reabsorption; usually part of a more generalized abnormality, such as Fanconi syndrome.

piqûre d. [Fr.], puncture d.

pregnancy d., see subclinical d.

puncture d., piqûre d.; experimental d. produced in animals by puncture of the floor of the fourth ventricle of the brain.

renal d., renal *glycosuria*.

starvation d., after prolonged fasting, glycosuria following the ingestion of carbohydrate or glucose because of reduced output of insulin and/or reduced rate of glucose metabolism with a reduced ability to form glycogen.

steroid d., d. produced by pharmacological doses of steroid hormones, particularly glucocorticoids or estrogens; characterized by one or more of the typical manifestations of d. mellitus.

subclinical d., a form of d. mellitus that is clinically evident only under certain circumstances, such as pregnancy or extreme stress; persons so afflicted may, in time, manifest more severe forms of the disease.

thiazide d., impaired carbohydrate metabolism associated with the use of thiazide diuretic drugs; severe manifestations are seen in persons having d. mellitus, but impairment is mild or absent in nondiabetic individuals.

type I d., insulin-dependent d. mellitus.

type II d., non-insulin-dependent d. mellitus.

vasopressin-resistant d., nephrogenic d. insipidus.

diabetic (dī-ă-bet'ik). 1. Relating to or suffering from diabetes. 2. One who suffers from diabetes.

diabetogenic (dī'ă-bet-ō-jen'ik, -bē-tō-jen'ik). Causing diabetes.

diabetogenous (dī'ă-bē-toj'en-ŭs). Caused by diabetes.

diabetology (dī'ă-be-tol'ō-jē). The field of medicine concerned with diabetes.

diacele (dī'ă-sēl) [G. *dia-*, through, + *koilia*, a hollow]. *Ventriculus tertius*.

diacetate (dī-as'ē-tāt). 1. Acetoacetate. 2. A compound containing two acetate residues.

diacetemia (dī-as-ē-tē'mē-ă). A form of acidosis resulting from the presence of acetoacetic (diacetic) acid in the blood.

diacetic acid (dī-ă-sē'tik, -set'ik). Acetoacetic acid.

diacetonuria (dī-as'ē-tō-nū'rē-ă). Diaceturia.

diaceturia (dī-as-ē-tū'rē-ă). Diacetonuria; the urinary excretion of acetoacetic (diacetic) acid.

diacetyl (dī-as'ē-til). 2,3-Butanedione; a yellow liquid, $(CH_3CO)_2$, having the pungent odor of quinone and carrying the aromas of coffee, vinegar, and other foods.

diacetylcholine (dī-as'ē-til-kō'lēn). Succinylcholine.

diacetylmonoxime (DAM) (dī-as'ē-til-mon-ok'sīm). A 2-oxo-oxime that can reactivate phosphorylated acetylcholinesterase *in vitro* and *in vivo;* it penetrates the blood-brain barrier.

diacetylmorphine (dī-as'ē-til-mōr'fēn). Heroin.

diacetyltannic acid (dī-as'ē-til-tan'ik). Acetyltannic acid.

diachronic (dī-ă-kron'ik) [dia- + G. *chronos*, time]. Systematically observed over time.

diacid (dī-as'id). Denoting a substance containing two ionizable hydrogen atoms per molecule; more generally, a base capable of combining with two hydrogen ions per molecule.

diaclasis, diaclasia (dī-ak'lă-sis, dī-ă-klā'zē-ă) [G. *diaklasis*, a breaking up, fr. *dia*, through, + *klasis*, a breaking]. Osteoclasis.

diacrinous (dī-ak'ri-nŭs) [G. *dia-krinō*, to separate one from another]. Excreting by simple passage through a gland cell.

diacrisis (dī-ak'ri-sis) [G. *dia-*, through, + *krisis*, a judgment]. Diagnosis.

For the purposes of this specification the term "comprising" is to be understood to mean "including but not limited to".

The invention also provides a method of treatment of a pathological condition in a subject in need of such treatment, comprising the step of administering an effective dose of a composition according to the invention to said subject.

It will be clearly understood that the dose and route of administration will depend upon the condition to be treated, and the attending physician or veterinarian will readily be able to determine suitable doses and routes. It is contemplated that the compositions of the invention may be administered parenterally, for example by intravenous or subcutaneous injection, topically, for example adsorbed on gels or sponges, or directly into the tissue to be treated, for example by intra-ocular or intra-tumoral injection.

The subject to be treated may be a human, or may be an animal, particularly domestic or companion mammals such as cattle, horse, sheep, goats, cats and dogs.

In the compositions of the invention the nucleic acid or vector may simply be mixed with the hyaluronic acid, or may optionally be physically or chemically coupled to hyaluronic acid.

In a preferred embodiment this aspect of the invention provides compositions and methods for treatment of a retinal disease mediated by abnormal vascularization, in which the nucleic acid is an anti-sense nucleic acid sequence corresponding to at least a part of the sequence encoding vascular endothelial growth factor (VEGF), and is administered together with a hyaluronic acid as described below.

Many forms of HA are suitable for use for the purposes of the invention. In particular, both low and high molecular weight forms of HA may be used. The only requirement is that the HA be of a degree of purity and

sterility to be suitable for pharmaceutical use; preferably the HA is also pyrogen-free. High molecular weight preparation of HA may require dilution prior to use. In particular, commercially-available HA products suitable for use in the invention are those supplied by Hyal Pharmaceutical Corporation, Mississauga, which is a 2% solution of HA having a mean average molecular weight of about 225,000; sodium hyaluronate produced by Life Core™ Biomedical, Inc.; Pro Visc (Alcon Laboratories); and "HEALON" (Pharmacia AB, Üppsala). It will be clearly understood that for the purposes of this specification, the term derivatives of HA encompasses homologues, analogues, complexes, esters and fragments and sub-units of HA.

Derivatives of HA which may be used in the invention include pharmaceutically-acceptable salts thereof, or fragments or subunits of HA. The person skilled in the art will readily be able to determine whether a given preparation of HA, or a particular derivative, complex *etc.* of HA, is suitable for use in the invention.

According to a second aspect, the invention relates to a composition for treatment of a retinal disease mediated by abnormal vascularisation, comprising an anti-sense nucleic acid sequence corresponding to at least a part of the sequence encoding vascular endothelial growth factor (VEGF), and optionally further comprising one or more adjuvants such as hyaluronic acid or a dendrimer compound for increasing cellular uptake, together with a pharmaceutically acceptable carrier. The use of dendrimer compounds to transport genetic material into target cells is disclosed in International Patent Application No. WO 95/24221 by Dendritech Inc *et al.*

THE CLAIMS DEFINING THE INVENTION ARE AS FOLLOWS:

1. A composition comprising

(a) a nucleic acid sequence encoding a specific protein and

(b) a hyaluronic acid or a derivative thereof,

together with a pharmaceutically-acceptable carrier, wherein the nucleic acid is either an anti-sense nucleic acid directed against a target sequence or a sense nucleic acid encoding a specific desired protein.

2. A composition according to Claim 1, in which the nucleic acid is a nucleotide sequence which is in the anti-sense orientation to a target sequence.

3. A composition according to Claim 2, in which the target nucleic acid sequence is a genomic DNA, a cDNA, a messenger RNA or an oligonucleotide.

4. A composition according to Claim 1, in which the nucleic acid is present in a vector comprising a nucleic acid sequence to be transferred into a target cell.

5. A composition according to Claim 4, in which the nucleic acid sequence to be transferred is a genomic DNA, a cDNA, a messenger RNA or an oligonucleotide.

6. A composition according to Claim 5, wherein the vector comprises a sense sequence to be provided to a target cell in order to exert a function.

7. A composition according to Claim 6, in which the vector comprises an anti-sense sequence to be provided to a target cell in order to inhibit the functioning of a nucleic acid present in the target cell.

8. A composition according to any one of Claims 4 to 7, in which the vector is a liposome.

9. A composition according to any one of Claims 4 to 8, in which the vector is a virus.

10. A composition according to Claim 9, in which the virus is an adenovirus, an adeno-associated virus, a herpes virus or a retrovirus.

11. A composition according to Claim 9, in which the virus is a replication-defective adenovirus.

12. A composition according to Claim 11, where the virus is a replication-defective adenovirus comprising a promoter selected from the group consisting of respiratory syncytial virus promoter, cytomegalovirus promoter,

comprising a nucleic acid sequence to be transferred into a target cell.

24. A composition according to Claim 23, in which the vector is a virus.

25. A composition according to Claim 24, in which the virus is an adenovirus, an adeno-associated virus, a herpes virus or a retrovirus.

26. A composition according to Claim 24 or Claim 25, in which the viral vector is a replication-defective recombinant virus.

27. A composition according to Claim 26, where the virus is a replication-defective adenovirus comprising a promoter selected from the group consisting of respiratory syncytial virus promoter, cytomegalovirus promoter, adenovirus major late protein (MLP), VA1 pol III and β-actin promoters.

28. A composition according to Claim 27, wherein the vector is pAd.RSV, pAd.MLP or pAd.VA1.

29. A composition according to Claim 27, wherein the vector is Ad.RSV.αVEGF or Ad.VA1.αVEGF.

30. A composition according to any one of Claims 1 to 29, wherein the vector also comprises a polyadenylation signal sequence.

31. A composition according to Claim 30, wherein the polyadenylation signal sequence is the SV40 signal sequence.

32. A composition for treatment of a retinal disease mediated by abnormal vascularization, comprising an anti-sense nucleic acid sequence corresponding to at least a part of the sequence encoding VEGF, and optionally further comprising one or more adjuvants for increasing cellular uptake, together with a pharmaceutically-acceptable carrier.

33. A composition according to Claim 32, comprising as adjuvant hyaluronic acid or a derivative thereof.

34. A composition according to Claim 32 or Claim 33, wherein the anti-sense sequence has 100% complementarity to a corresponding region of the gene encoding VEGF.

35. A composition for short-term treatment according to Claim 32 or Claim 33, wherein the anti-sense sequence is 16 to 50 nucleotides long.

36. A composition for short-term treatment according to Claim 32 or Claim 33, wherein the anti-sense sequence is 16 to 22 nucleotides long.

37. A composition for short-term treatment according to Claim 32 or Claim 33, wherein the anti-sense sequence is 16 to 19 nucleotides long.

38. A composition according to Claim 32 or Claim 33, wherein a modified oligonucleotide as herein defined is used, and the anti-sense sequence is 7 to 50 nucleotides long.

39. A composition for long-term treatment of a retinal disease mediated by abnormal vascularisation, comprising a recombinant virus comprising an anti-sense nucleic acid sequence corresponding to at least part of the sequence encoding VEGF, together with a pharmaceutically-acceptable carrier, wherein the anti-sense sequence is between 20 nucleotides in length and the full length sequence encoding VEGF.

40. A composition according to Claim 39, further comprising as adjuvant hyaluronic acid or a derivative thereof.

41. A composition according to Claim 39, or Claim 40, wherein the anti-sense sequence is between 50 nucleotides long and the full length sequence of VEGF.

42. A composition according to any one of Claims 22 to 41, wherein the VEGF sequence is that of VEGF from human retinal pigment epithelial cells or choroidal endothelial cells.

43. A composition for treatment of a retinal disease mediated by abnormal vascularisation, wherein said treatment is effective for an indefinite period, comprising

a virus comprising an anti-sense DNA corresponding to at least part of the sequence encoding VEGF, together with a pharmaceutically-acceptable carrier, wherein said virus is one capable of integrating the anti-sense sequence into the genome of the target cell.

44. A composition according to Claim 43, further comprising as adjuvant hyaluronic acid or a derivative thereof.

45. A composition according to Claim 43 or Claim 44, wherein the virus is an adeno-associated virus.

46. A composition according to Claim 43, Claim 44 or Claim 45, wherein the anti-sense sequence is between 20 nucleotides long and the full length sequence of VEGF.

47. A composition according to Claim 43, Claim 44 or Claim 45, wherein the anti-sense sequence is between 50 nucleotides long and the full length sequence of VEGF.

48. A method of treatment of a retinal disease mediated by abnormal neovascularisation, comprising the step of administering an effective amount of an anti-sense nucleic acid sequence corresponding to at least part of the sequence encoding VEGF into the eye(s) of a subject in need of such treatment, thereby to inhibit neovascularisation.

49. A composition according to Claim 48, further comprising as adjuvant hyaluronic acid or a derivative thereof.

50. A method according to Claim 48 or Claim 49, wherein the anti-sense sequence is 16 to 50 nucleotides long.

51. A method according to Claim 48 or Claim 49, wherein the anti-sense sequence is 16 to 22 nucleotides long.

52. A method according to Claim 48 or Claim 49, wherein the anti-sense sequence is 16 to 19 nucleotides long.

53. A method according to Claim 48 or Claim 49, wherein a modified oligonucleotide as herein defined is used, and the anti-sense sequence is 7 to 50 nucleotides long.

54. A method of treatment of a retinal disease mediated by abnormal neovascularisation, comprising the step of administering an effective amount of a composition

according to any one of claims 22 to 47 to a subject in need of such treatment

55. A method of treatment of a retinal disease mediated by abnormal neovascularisation, comprising the step of administering a composition according to any one of Claims 39 to 42 to the eye(s) of a subject in need of such treatment, thereby to inhibit neovascularisation in the long term.

56. A method of treatment of a retinal disease mediated by abnormal neovascularisation, comprising the step of administering an effective amount of a composition according to Claims 42 to 47 into the eye(s) of a subject in need of such treatment, thereby to inhibit neovascularisation for an indefinite period.

57. A method according to any one of Claims 48 to 56, wherein the retinal disease is selected from the group consisting of age-related macular degeneration, diabetic retinopathy, branch or central retinal vein occlusion, retinopathy of prematurity, rubeosis iridis and corneal neovascularisation.

58. A method of promoting uptake of an exogenous nucleic acid sequence by a target cell, comprising the step of exposing the cell to the nucleic acid, or to a virus or vector comprising the nucleic acid, in the presence of a hyaluronic acid or a derivative thereof.

59. A method according to Claim 58, in which the target cell is a phagocytic cell.

60. A method according to Claim 58 or Claim 59, in which the nucleic acid and hyaluronic acid are administered together *in vitro*.

61. A method according to Claim 58 or Claim 59, in which the nucleic acid and hyaluronic acid are administered together *in vivo*.

GRIFFITH HACK

PATENT AND TRADE MARK ATTORNEYS

MELBOURNE OFFICE
509 ST KILDA ROAD, MELBOURNE VIC 3004, AUSTRALIA

Correspondence to:
GPO BOX 1285K, MELBOURNE VIC 3001, AUSTRALIA
TELEPHONE (03) 9243 8300 TELEX 30921
FACSIMILE + 61-3 9243 8333 / 9243 8334
EMAIL ghack@peg.apc.org

10 October 1997

The Commissioner of Patents

Sir

IN THE MATTER OF International Patent Application No. PCT/AU96/00664
in the name of HYAL PHARMACEUTICAL AUSTRALIA LIMITED
Our Ref: VS:SB:FP4167

We refer to the first Written Opinion dated 11 June 1997 issued by the International Preliminary Examining Authority, and offer the following comments in response to the objections of the Examiner, Ms Jayne Briton.

As pointed out in our letter of 30 April 1997, Citation 1 is raised only against Claims 1 to 21, and relates to a cosmetic mask composition, comprising a DNA salt of high molecular weight together with a hydrophilic film-forming polymer and an alkaline or ammonium salt of hyaluronic acid. The composition is designed to be used as a hydrating agent for the skin. The reference does not disclose a nucleic acid of any specific nucleotide sequence, let alone any anti-sense sequence, or any suggestion that the composition may be useful in gene therapy directed at any particular target tissue, such as the eye. Amendment to Claim 1 is proposed in order to specify that the nucleic acid is either an anti-sense nucleic acid directed against a target sequence, or a nucleic acid encoding a desired protein. All of Claims 2 to 16 define features which clearly distinguish the invention from the citation. Not only is there no disclosure or suggestion of a DNA sequence in the anti-sense orientation to a target sequence, nor is there any suggestion of what the nature of such target sequence might be, or of any vector (Claims 5 to 16). As a result of the proposed amendment, Claims 17, 19 and 21 insofar as they are dependent on Claim 1 are also distinguished. The reference does not propose administration of any composition by injection, so Claim 18 is distinguished even without the amendment.

Citation 4 is raised only against Claims 32 to 54. It is respectfully pointed out that on a fair reading of this reference as a whole, it is evident that there is no disclosure or suggestion of any adjuvant for cellular uptake, let alone the use of hyaluronic acid as such an adjuvant. In addition, the citation is limited to anti-sense oligonucleotides of 19 to 20 nucleic acids, based on the sequence of murine VEGF. There is no disclosure or suggestion of specific targeting of sequences to any tissue of the eye, or of any viral vector. The only ocular condition mentioned is diabetic retinopathy.

Moreover, at Page 10 the citation states that "the present invention provides synthetic anti-sense oligonucleotides", and thus does not suggest the expression of an inverted VEGF

sequence or any part thereof within the target cells. At Page 11 it is stated that "these targeted regions of the VEGF gene include any portions of known exons". In addition, exon-intron boundaries are potentially useful targets for anti-sense inhibition of VEGF expression. From this sentence and from the examples given in the specification it would be evident to the person skilled in the art that the citation relates to a part of the VEGF gene which is transcribed into VEGF messenger RNA. In contrast, the oligonucleotides of the present invention target 5' and 3' untranslated regions in order to effect downregulation of specific VEGF expression, which in the subject to be treated has been upregulated as a result of the ocular disease. This would be clear to the skilled addressee of the specification from Examples 1 to 3, which all refer by implication to anti-sense sequences. Compositions for long-term treatment, in which the anti-sense sequence is greater than 20 nucleotides long, and compositions effective for an indefinite period, in which a viral vector capable of integrating the anti-sense sequence into the genome of the target cell, are neither disclosed nor suggested by the reference. Thus Claims 39 to 45, and 52 to 54 are clearly distinguished from these references. Since Claim 38 requires hyaluronic acid or a derivative thereof as an adjuvant, this is also clearly distinguished.

It is respectfully pointed out that in Box V it is stated that Claims 1 to 21, 22 to 31 and 55 to 58 are under objection for lack of inventive step. From this it appears that Claims 32 to 54 are not objected to on this basis. Clarification is requested in the light of our comments above in relation to Citation 4.

The Examiner states that Citation 2 discloses the use of hyaluronic acid as an aid in drug delivery, for drug substances including hydroxyl, amino and sulphhydryl groups, and that since both DNA and RNA are within the scope of this description, a person skilled in the art would be led to try them. It is respectfully pointed out that there is no disclosure or suggestion whatsoever that hyaluronic acid could be used to stimulate the cellular uptake of any high molecular weight substance, let alone a nucleic acid. The only agents specifically disclosed are the antibiotic gentamicin, salicylic acid, serotonin, and mydriacyl. None of these compounds is remotely related to any nucleic acid, and this would be immediately evident to any person of even basic skill in the art. Moreover, although both DNA and RNA indeed contain hydroxyl and amino groups, they do not contain sulphhydryl groups. The reference describes the use of hyaluronic acid in solution or non-soluble *cross-linked* form in order to provide slow release of a drug from the system. In contrast, the present invention utilises hyaluronic acid which is not cross-linked. To suggest that this reference is in any way relevant to the present invention represents an extreme example of the application of hindsight, which is statutorily improper.

Similarly, though the citation does suggest that hyaluronic acid can be used as a penetration aid for the delivery of a wide variety of drugs, only a relatively small number of different drug classes is actually exemplified. None of these drug classes is remotely related to nucleic acid. A detailed analysis of this reference is attached. Again, to state that a person skilled in the art would be led by this specification to try using hyaluronic acid with nucleic acids is to use hindsight in the knowledge of the present invention. There is nothing whatsoever in either

Citation 2 or Citation 3 to suggest that there would be any reasonable expectation of success in doing so. Nor is there any motivation provided in either of these specifications, or in Citation 4, for a person skilled in the art faced with the problem of providing improved delivery of nucleic acid to the target cell to combine the teaching of Citation 4 with that of either or both of Citations 2 or 3.

The disclosure of Citation 3 is based on the hypothesis that *diseased* cells such as cancer cells, and cells in inflamed or injured tissue will have a rate of uptake of hyaluronic acid higher than that in normal cells, and consequently that hyaluronic acid will immediate increased uptake of pharmaceutical agents. In other words, the citation is based on the hypothesis that any pharmaceutical agent formulated in hyaluronic acid will be taken up by the diseased cell at a higher rate than by normal cells. Otherwise there would be no selectivity in the cellular uptake. In contrast, in the present specification there is no suggestion at all that improved uptake of viral vectors comprising the desired nucleic acid results from differential uptake by diseased cells. In fact, the inventors have shown in tissue culture experiments that hyaluronic acid stimulates uptake of adenovirus by normal retinal pigment epithelium cells and by fibroblasts, and propose a mechanism based on concentration of a virus in the vicinity of the cells.

While, as stated in our letter of 30 April, Citation 5 discloses general methods for transcriptional modulation of genes encoding growth factors, the only specific factors exemplified are human growth hormone promoter, uErbB2 proto-oncogene, the K-ras proto-oncogene, and the MMTV promoter. VEGF is not specifically exemplified, and there is no mention of ocular disease, hyaluronic acid, or any viral vector. Claim 22 requires that the composition comprises hyaluronic acid; since all of Claims 23 to 31 are directly or indirectly dependent on Claim 22, these also require hyaluronic acid. Since the reference neither discloses nor suggests hyaluronic acid in any composition, again this reference is clearly distinguished. Again there is no motivation to combine Citation 5 with either or both of Citations 2 and 3, and in any case it appears that the Examiner has cited Reference 5 only.

Three further documents are cited in Box VI against the novelty of the invention as defined in Claims 32 to 54. Comments on these references were provided with our letter of 30 April 1997. These comments are maintained, and in the absence of specific evidence that basis for the objection is found in the *priority* document in respect of each of the citations, it is requested that the objection be withdrawn. In any case, as argued above, Claims 38 to 54 are clearly distinguished.

WO 96/23065 (PCT/US96/01189 claims priority of U.S. Patent Application No. 378860 filed 26 January 1995. WO 96/27006 (PCT/US96/02840) claims priority of U.S. Patent Application No. 398945 dated 2 March 1995, and No. 569926 dated 8 December 1995. The earliest priority date of the present application is 23 October 1995. Thus only information disclosed in U.S. Patent Applications No. 378860 and No. 398945 is citable against this application. These two U.S. specifications are very closely similar, using the same oligonucleotides in their

examples, and including many pages which are identical. At Page 15 lines 2 to 6 of USSN-378860, and in the two other specifications, it is clearly stated that:

> "These targeted regions of VEGF gene include any portions of the known exons. In addition, exons/intron boundaries are potentially useful targets for anti-sense inhibition of VEGF expression".

GenBank analysis of the oligonucleotides disclosed in the citation reveals that the position of all the oligonucleotides falls at least partially within the transcribed VEGF mRNA sequence. There are a couple of examples in which sequences outside the Start and Stop codons were randomly selected; however, no explanation is given as to why these particular regions were targeted. All three priority documents clearly state that the oligonucleotides target VEGF-specific sequences.

The approach of the present inventors is conceptually different from this. The increase in VEGF expression caused by hypoxia can be accounted for by two principal mechanisms:

1. An increase in the rate of transcription.

2. An increase in mRNA stability.

The Hybridon priority documents nowhere suggest that the oligonucleotides disclosed therein could in any way influence these two factors. In contrast, in the present specification the oligonucleotides are designed to target the 5' and 3' *untranslated* regions, which contain the regulatory elements of the VEGF which are induced by hypoxia. These include enhancers, SP-1 sites, the Activator-protein-2 sites, and AU-rich Instability Rich elements. Binding of an anti-sense oligonucleotide to the enhancer elements would regulate these elements, thus preventing VEGF mRNA production. The regulation of AU-rich Instability Rich elements provides a fine regulation of VEGF production, and is particularly important in cells which might need a basic level of VEGF synthesis to sustain their normal function. In the present application the oligonucleotide contains at least some elements which are not specific for VEGF. In contrast to this, the method of Hybridon inhibits the translation of VEGF mRNA into protein, thus preventing VEGF production completely without any possibility of being able to regulate it. The same considerations apply to U.S. Patent Application No. 569926. This specification is limited to oligonucleotides, and neither the use of modified versions targeting regulatory elements nor viral expression of anti-sense RNA is suggested or disclosed.

As previously notified neither of the Hybridon citations discloses or suggests long-term or permanent treatment, and hyaluronic acid as a vehicle is neither disclosed nor suggested. Nor is the use of any particular viral vector suggested, either alone or in conjunction with hyaluronic acid. The sequences disclosed in WO 96/27006 are specific for nucleotides 58 to 90 of VEGF gene.

The basis for citation of WO 96/00286 by Toagosei Co Ltd is not understood. In our telephone discussion on 16 August 1997, the Examiner acknowledged that no English text of this specification was available to her, and that the objection was raised because VEGF was mentioned at Page 35 of the Japanese text. This page, provided by the Examiner, is a table in which various code numbers, presumably identifying the short 5'→3' oligonucleotide sequence in Column 2, have some relationship with a column in which the terms "VEGF" and "%" appear in the heading. A fourth column also has "%" in its heading. No further information than this can be derived from Page 35. In particular, it is quite impossible to tell whether the table refers to % homology with VEGF, % inhibition of VEGF synthesis, % stimulation of VEGF synthesis, % VEGF activity, or some other parameter. A GenBank search revealed that some of the oligonucleotides listed in the table had no homology with the VEGF sequence. Some examples are attached for the Examiner's information. The number in the middle of the first column in the table is used for identification of each sequence searched. Thus the Examiner is unable to state that this reference discloses each and every one of the features of Claims 32 to 54. Consequently it is submitted that this citation is unjustified, and should be withdrawn.

It is desired to take the opportunity to incorporate further examples providing experimental support for the scope of the claims as originally lodged. It is submitted that these examples merely provide further illustration of the invention, and do not constitute new matter. It is also desired to delete reference to two publications which were mentioned at Page 12 of the specification. Neither of these publications in fact discloses methods for attaching DNA to hyaluronic acid, and they were included in error.

Substitute Pages 12, 13, 18, 18a, 53 to 53m, 56, 57, 57a, 60 and 6a are lodged herewith, together with working copies indicating the nature and location of the proposed amendments.

Favourable reconsideration is requested.

Yours respectfully

International Patent Application No. PCT/AU96/00664
corresponding to Australian PN 6161 and PN 9047
in the name of HYAL PHARMACEUTICAL AUSTRALIA LIMITED

COMMENTS ON CITATION

Australian Patent Application No. 52774/93
by Norpharm Co Inc.

Pages 6 to 13 of this specification discuss hyaluronic acid, and prior art patents relating to the use of hyaluronic acid as a therapeutic agent on its own, or as a delivery agent for other pharmaceuticals. In particular, U.S. Patent No. 4,141,973 is acknowledged at Page 9 lines 1 to 17 to disclose administration of hyaluronic acid as an antibiotic. We consider that the assumptions set out at lines 6 to 17 are quite unjustified. The important factor is that the combination of the two is disclosed. U.S. Patent No. 4,840,941 is referred to at Page 12 as disclosing the use of hyaluronic acid fractions and esters of hyaluronic acid as a vehicle for pharmaceutical agents, including for use in treatment of cardiovascular conditions, respiratory infections, the renal system, endocrine conditions, cancer, cytostatic agents, immunostimulants, and immunosuppressants (see quotation at Page 12 line 15 to Page 13 line 10). The hyaluronic acid esters are stated to stimulate absorption, not only topically but also following oral or parenteral administration, and to favour absorption of the drug into the application cite.

We have carefully reviewed the statements of invention at Pages 17 to 33A, as well as the examples. The statements of invention are broad ranging, and purport to cover a large variety of active agents to be used in conjunction with hyaluronic acid, and a variety of conditions to be treated. Page 17 line 3 to Page 18 line 1 states that:

> *"Applicants have now discovered that combinations and formulations (for example an injectable formulation) can be provided for administration to a mammal for the treatment of a disease or condition, which combinations or formulation employ or incorporate as the case may be a therapeutically effective non-toxic amount of a medicinal and/or therapeutic agent to treat the disease or condition ... administered with, or carried in, an amount of hyaluronic acid and/or salts thereof ... sufficient to facilitate the agent's penetration through the tissue (including the scar tissue) at the site to be treated through the cell membranes into the individual cells to be treated".*

Page 17 lists the following the following types of agents:

- a free radical scavenger, for example ascorbic acid

- an anti-cancer agent, or chemotherapeutic agent (these are frequently regarded as synonymous)
- anti-viral agents, for example a non-ionic surfactant
- anionic surfactants, *eg.* cetalpyridinium surfactants
- cationic surfactants, *eg.* benzalkonium chloride
  (these two named agents are both general disinfectants)
- non-steroidal anti-inflammatory drugs, *eg.* indomethacin, naproxen *etc.*
- steroidal anti-inflammatory drugs
- anti-fungal agents
- detoxifying agents (unspecified)
- analgesics
- broncho dilators
- anti-bacterial agents
- antibiotics
- drugs for treatment of vascular ischaemia
- minoxidil (to stimulate hair growth)
- diuretics, *eg.* furosemide
- immunosuppressants, *eg.* cyclosporins
- lymphokines, *eg.* interleukin-2, α-interferon and β-interferon

This list of agents is recited repeatedly with reference to different aspects of the invention at Pages 18, 19, 20, 21, 22 and 23; in each case the statement regarding penetration through the tissue, including scar tissue, is also recited.

We note that at Page 18 lines 1 to 14 it is stated that the formulation can be administered via a variety of routes, and that the hyaluronic acid and/or salts thereof and the agent can be administered separately (Page 18 lines 7 to 9).

At Page 23 lines 30 to 35 it is postulated that the hyaluronic acid facilitates transport of the agent to the site to be treated, as recited in the statements of invention, and goes on at Page 23 line 36 to Page 24 line 6 to state that ethanol alone when injected directly into a tumour does not disperse throughout the tumour; however when it is administered into the tumour together with hyaluronic acid, dispersion throughout the tumour occurs. This is stated to be shown by scintigraphic assessment, but no results at all are presented. This is extremely surprising, since the postulated mechanism is the claimed novel feature.

A more detailed listing of conditions to be treated and agents to be used is set out at Pages 34 and 35. This presents further examples of specific agents *eg.* cholestyramine as a detoxifying agent.

Despite the wide variety of conditions and agents mentioned, and the fact that some of these conditions, in particular cancers, have been known for some time as targets for gene therapy, there is not the slightest suggestion that hyaluronic acid or any derivative of hyaluronic acid could be used as an agent to facilitate gene therapy, or as a vehicle for delivery of any nucleic acid sequence, whether oligonucleotide or polynucleotide and whether a sense or anti-sense sequence. We therefore consider tha this specification does not encompass the invention disclosed in he Lions Eye Institute applications.

The invention also provides a method of treatment of a pathological condition in a subject in need of such treatment, comprising the step of administering an effective dose of a composition according to the invention to said subject.

It will be clearly understood that the dose and route of administration will depend upon the condition to be treated, and the attending physician or veterinarian will readily be able to determine suitable doses and routes. It is contemplated that the compositions of the invention may be administered parenterally, for example by intravenous or subcutaneous injection, topically, for example adsorbed on gels or sponges, or directly into the tissue to be treated, for example by intra-ocular or intra-tumoral injection.

The subject to be treated may be a human, or may be an animal, particularly domestic or companion mammals such as cattle, horse, sheep, goats, cats and dogs.

In the compositions of the invention the nucleic acid or vector may simply be mixed with the hyaluronic acid, or may optionally be physically or chemically coupled to hyaluronic acid.

In a preferred embodiment this aspect of the invention provides compositions and methods for treatment of a retinal disease mediated by abnormal vascularization, in which the nucleic acid is an anti-sense nucleic acid sequence corresponding to at least a part of the sequence encoding vascular endothelial growth factor (VEGF), and is administered together with a hyaluronic acid as described below.

Many forms of HA are suitable for use for the purposes of the invention. In particular, both low and high molecular weight forms of HA may be used. The only requirement is that the HA be of a degree of purity and sterility to be suitable for pharmaceutical use; preferably the HA is also pyrogen-free. High molecular weight preparation of HA may require dilution prior to use. In

particular, commercially-available HA products suitable for use in the invention are those supplied by Hyal Pharmaceutical Corporation, Mississauga, which is a 2% solution of HA having a mean average molecular weight of about 225,000; sodium hyaluronate produced by Life Core™ Biomedical, Inc.; Pro Visc (Alcon Laboratories); and "HEALON" (Pharmacia AB, Üppsala). It will be clearly understood that for the purposes of this specification, the term derivatives of HA encompasses homologues, analogues, complexes, esters and fragments and sub-units of HA.

Derivatives of HA which may be used in the invention include pharmaceutically-acceptable salts thereof, or fragments or subunits of HA. The person skilled in the art will readily be able to determine whether a given preparation of HA, or a particular derivative, complex *etc.* of HA, is suitable for use in the invention.

According to a second aspect, the invention relates to a composition for treatment of a retinal disease mediated by abnormal vascularisation, comprising an anti-sense nucleic acid sequence corresponding to at least a part of the sequence encoding vascular endothelial growth factor (VEGF), and optionally further comprising one or more adjuvants such as hyaluronic acid or a dendrimer compound for increasing cellular uptake, together with a pharmaceutically acceptable carrier. The use of dendrimer compounds to transport genetic material into target cells is disclosed in International Patent Application No. WO 95/24221 by Dendritech Inc *et al.*

8e. ICAM staining on F2000 fibroblasts; 8f. RHAMM staining on F2000 fibroblasts.

Figure 9 shows micrographs of choriocapillary endothelial cells isolated from porcine eye, illustrating their characteristic appearance (top panel), presence of Factor VIII-related antigen (middle panel), and ability to take up acetylated low-density lipoprotein into the cytoplasm (bottom panel).

Figure 10 shows the effects of a variety of hyaluronic acid preparations on tube formation by choriocapillary endothelial cells.

Figure 11 shows the alkaline phosphatase staining of CD44 antigen in retinal pigment epithelium cells. In each case the epithelium is at the bottom of the picture with choroid above.

A. Unbleached pigment epithelium layer

B. Pigment epithelium layer bleached to remove melanin granules.

C. Bleached pigment epithelium stained with alkaline phosphatase-labelled anti-CD44 antibody.

Figure 12 shows the results of DNA PCR and RT-PCR analysis of transfection of a retinal pigment epithelial cell line with $VEGF_{165}$.

Figure 13 shows the effect of $VEGF_{165}$ produced by transfected RPE cells on tube formation by choriocapillary endothelial cells.

Figure 14 shows the results of Northern blot analysis of the expression of sense and anti-sense VEGF RNA in Ad.VAI.VEGFS and Ad VAI.VEGFAS transduced human embryonal kidney cells (293 cells).

Figure 15 shows the results of Northern blot analysis of the expression of sense and anti-sense VEGF RNA in Ad.VAI.VEGFS and AD VAI.VEGFAS transduced retinal pigment epithelial cells (RPE 51).

DETAILED DESCRIPTION OF THE INVENTION

The invention will now be described by way of reference only to the following non-limiting examples. In some of these examples, the feasibility of the methods utilised in the invention is demonstrated using anti-sense oligonucleotides complementary to cathepsin S (CATSC).

Approximately 40% of animals treated the above described way developed growth of blood vessels into the retina from the choroid. This growth is accompanied by the upregulation of VEGF expression, providing an excellent system to test our oligonucleotides and constructs.

Example 18 Inhibition of RPE-VEGF Expression with Anti-Sense Oligonucleotides, Ad.RSV.aVEGF and rAAVaVEGF *In Vivo* in Rats

Neovascularisation can be induced using pocket implants in the choroid or the subretinal layer. One of the disadvantages of these models is that the process of neovascularisation might not follow the same biochemical steps which naturally occur in humans suffering from ARMD. To overcome these difficulties we use an animal model in which choroidal neovascularisation is induced by VEGF overexpression in the RPE cells. Using recombinant adenoviruses carrying VEGF, for example Ad.RSV.VEGF, for the *in vivo* trials all animal models described above are utilised to provide us with a wide range of information. Tests are conducted to demonstrate the expression of a VEGF expression over a period of one year. Using Northern and Western blot analysis, VEGF down-regulation is monitored and immunohistochemistry is used to demonstrate the down-regulation of VEGF expression in a cell-specific manner. Using the above described animal models, choroidal neovascularisation is monitored by histology and angiography. These models are applicable to all the embodiments of the invention.

Example 19 Expression of VEGF Antisense mRNA fragments by Ad.VAI.AVEGF recombinant adenovirus

Generation of recombinant adenoviruses expressing VA1-ratVEGF antisense RNAs. The Ad2 virus-associated RNA (VA1 RNA) was chosen to produce the antisense rat VEGF RNA structures. VA1 is a simple gene containing two intragenic

promoter regions, namely box A and box B, and is transcribed by RNA polymerase III. Other RNA polymerase III-transcribed genes include those for tRNAs and 5SrRNAs, which are synthesised in large amounts and in most cell types (reviewed in Ciliberto *et al*, 1983). The VA1 RNA is thought to maintain a secondary structure consisting of two imperfect stems joined at a more complex and functional central domain (Ghadge *et al*, 1994). By cloning short antisense VEGF sequences into the loop at the end of one imperfect stem hybrid, RNA structures were produced as detailed below.

b) Cloning into pVA1

pVA1 is an expression vector containing the VA1 gene cloned into the SmaI site of pEMBL9, and was provided by A. Nichols. A BamHI site immediately downstream of box B was used for cloning in the antisense VEGF sequences. A 130bp rat VEGF fragment, corresponding to -61 to +69bp relative to the adenosine of the ATG start codon of the rat VEGF cDNA (see Genbank accession numbers U22373 and M32167) was generated by the reverse transcriptase-polymerase chain reaction (RT-PCR). The source of RNA was rat RPE cells that had been subjected to 24 hours in hypoxic conditions (2% O2 in a Sanyo O2/CO2 incubator). The PCR products were cloned into the BamHI site of pVA1. The clones were subsequently sequenced for identification, Taq-induced errors and sequence orientation using dye-terminator chemistry (Perkin-Elmer, Foster City, CA) on an ABI 310 DNA sequencer. It was noted that there were three base pair differences to the published sequence (Levy et al., 1995). Both antisense and sense direction clones were isolated. A 24bp fragment of rat VEGF, corresponding to -2 to +22bp relative to the ATG start codon was generated by annealing two specific oligonucleotides that generated BamHI sticky ends and cloning the product into the BamHI site of pVA1. Again the orientation was determined by DNA sequencing and both antisense and sense clones isolated.

c) Generation of adenoviruses containing VA1-rVEGF constructs

In order to generate adenoviruses the pVA1 constructs were sub-cloned into the vector pDE1sp1A (Microbix Biosystmems Inc., Ontario, Canada). This vector carries the necessary adenovirus sequences required for homologous recombination between the viral backbone and the plasmid. The pVA1 constructs were digested with EcoRI and XbaI (Promega Corporation, Madison WI) and then directionally cloned into the multiple cloning site in pDE1sp1A. The new plasmids were amplified and purified by Qiagen columns (Qiagen, Hilden, Germany). The pDE1sp1AVA1-rVEGF plasmids were then cotransfected with Cla1 (Promega Corporation, Madison, WI) digested adenovirus E1-E3 deletion mutant dl324 DNA (provided by M. Perricaudet) into the human embryonal kidney cell line, 293 (Microbix Biosystems Inc., Ontario, Canada) using the calcium phosphate precipitation method (Hitt *et al*, 1994). Four days later the cells were lysed by repeated cycles of freeze/thaw, and a small amount of the lysate was replated on fresh 293 cells seeded into 96 well plates. Wells showing cytopathic effect after 7 to 10 days were isolated, expanded and the DNA screened, by restriction mapping and hybridisation to radiolabelled specific oligonucleotides for successful homologous recombination. Those viruses selected for further use were then cloned by limiting dilution on monolayer 293 cells and amplified in order to generate a viral stock. Generally a viral stock was made from infecting 48 x 150cm2 flasks of monolayer 293 cells. 48 hours later the cells were harvested into a small volume of 20mM Tris.Cl pH 8.0. Following several cycles of freeze/thaw the cellular debris was removed by extraction with an equal volume of trichlorotrifluroethane (Sigma Chemical Co., St Louis, MO). The viral particles were banded by CsCl density ultracentrifugation (Hitt *et al*, 1994) and then dialysed overnight at 4°C against phosphate

buffered saline. The viral stocks were titrated by limiting dilution on 293 cells seeded in 96 well plates.

d) Infection of 293 cells and RPE cells with AdVA1vegf130S and AdVA1vegf130AS

293 cells were infected with a low multiplicity of infection (MOI) until a cytopathic effect was observed. Human RPE 51 cells were infected with an MOI of 10 and 100 with AdVA1vegf130S and AdVA1vegf130AS for 48 hours. RNA was isolated using Trizol (Gibco-BRL, Grand Island NY), separated by formaldehyde gel electrophoresis, transferred to ZetaProbe GT membrane (BioRad, Hercules, CA), and probed with radiolabelled oligonucleotides specific for either the sense or antisense RNA species. In both cell types the viruses were shown to be capable of producing the desired VA1-rVEGF RNA molecules (Figures 14 and 15).

Example 20 Anti-Sense DNA Mediated Transcription Regulation

A number of alternative sites are proposed here to attempt to control the expression of the VEGF gene. These principally involve targeting regions in the 5' and 3' untranslated regions (UTR) of VEGF that have been identified to have roles in the transcriptional and post-transciptional regulation of this molecule.

It has been found that hypoxia increases the expression of VEGF, a situation which is replicated *in vivo* and results in numerous disease conditions. The increase in VEGF expression by hypoxia can be accounted for by two main mechanisms: firstly, an increase in the rate of transcription, and secondly an increase in the stability of the mRNA produced (Shima *et al*, 1995; Levy *et al*, 1995).

a) HIF-1/Epo/AP-1 enhancer

The most significant area thought to be responsible for the enhanced transcription rate contains a near consensus sequence for Hypoxia Inducible Factor-1

(HIF-1), followed closely by a region very similar in sequence to a 5 base pair enhancer element, both of which are found in the 3' untranslated region of the erythropoietin gene (Levy *et al*, 1995). Erythropoietin (Epo) is also known to be strongly regulated by hypoxia, and the same region of 5'UTR of VEGF has been mapped by others (Liu *et al*, 1995). Also closely associated with these motifs in the VEGF 5' region is a single consensus Activator Protein-1 (AP-1) binding site, which is conserved in human, rat and mouse VEGF sequences. The AP-1 transcription factors are members of the c-jun and c-fos family, which are also upregulated by hypoxia, and bind as heterodimers to the AP-1 binding sites. Taken together these sites represent a strong candidate region for potential therapeutic intervention by oligonucleotide molecules.

The HIF-1/Epo/AP-1 enhancer region of human VEGF, shown below, is located between positions 1388 to 1432 (GenBank accession number M63971), or is positioned relative to the coding region between positions -2013 to -1969.

HIF-1 Epo1 AP-1

5′ CCAGACTCCACAGTGCA**TACGTGGG**CTCC**AACAG**GTCCTCTTCCCTCCCAGTCAC**TGACTAA**CCCCGGAACCACACA

5

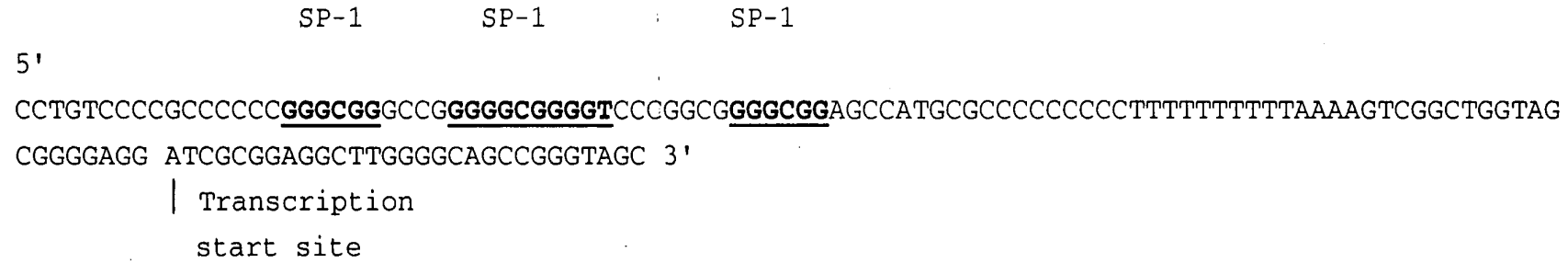
It is likely to be of greater importance to target oligonucleotides to the HIF-1 and Epo sites, since it has been shown that hypoxic induction of VEGF transcription can be independent of a functional AP-1 site (Finkenzeller *et al*, 1995). Since the HIF-1/Epo/AP-1 region is a likely enhancer element for the start of the transcritption process, it is possible that binding of oligonucleotides to the target DNA will have a potential effect in preventing effective transcription. An alternative strategy is to prevent binding of the *trans* acting enhancer element(s) by competitive binding of the enhancer proteins using oligonucleotides, as demonstrated by Levy *et al*, (1995), although excess quantities may be necessary for such competitive inhibition.

Possible oligonucleotide sequences are designed within this region and are either complementary to the upper strand (to bind to the DNA itself) or the same as the upper strand (which will bind to the lower strand and also potentially compete with the enhancer proteins for binding).

b) SP-1 sites

An alternative position of interest is the series of three adjacent SP-1 sites located at positions 2278 to 2310 (according to GenBank Accession Number M63971) or at positions -1123 to -1091 upstream of the ATG codon of the human VEGF coding region. The location of these three adjacent SP-1 sites approximately 50 bp upstream of the identified transcription start site (Levy *et al*, 1995) suggests that this region may play a potential role in transcriptional regulation.

The region encompassing the SP-1 sites and the transcription start site is shown below.


SP-1
SP-1
SP-1
5'
CCTGTCCCCGCCCCCCGGGCGGGCCGGGGGCGGGGTCCCGGCGGGGCGGAGCCATGCGCCCCCCCCCTTTTTTTTTTAAAAGTCGGCTGGTAG
CGGGGAGG ATCGCGGAGGCTTGGGGCAGCCGGGTAGC 3'
Transcription
start site

Oligonucleotides are designed around this region to hybridise either to the upper strand and lower strands that would prevent binding of the SP-1 protein.

A fourth SP-1 site at position 2883 to 2888, shown below, located between the transcription start site, shown above, and at the ATG translation initiation site, is also useful to target in combination with the other localised SP-1 sites to help to inhibit transcription.

5' SP-1

CTGACGGAGAGACAGACAGACA**CCGCCC**CCAGCCCCAGCTACCACCTCCTCCCCGGCCGG

c) Transcription Start Site

The design of oligonucleotides around the transcription start site shown previously provides further possible candidates for potential therapeutic intervention by potentially inhibiting the commencement of the transcription process, particularly in the region upstream of the start site where the RNA polymerase will bind to the DNA strand.

d) AP-2 Site

A single Activator Protein-2 (AP-2) site located at position 3265 to 3274 (or -136 to -127 relative to the ATG start codon) is another potential site for oligonucleotide targeting. Activator protein-2 transcription factors are *trans* acting proteins which bind at this site and are responsive to cAMP levels. Targeting oligonucleotides to the AP-2 site, shown below, may also prevent or block transcription factor binding and thus inhibit transcription of VEGF.

5' AP-2

TGCGCAGACAGTGCTCCAGCCGCGCGCGC**TCCCCAGGCC**CTGGCCCGGGCCTCGGGCCG

GGGAGGAAGA

Oligonucleotides are synthesized to hybridise to both the upper and lower strands of the DNA to test the effectiveness of each alternative to inhibit AP-2 binding.

e) AU-Rich Sequences in 3' UTR

The 3' UTR of numerous short lived mRNA's have regions of AU-rich sequences. A particular consensus nonameric sequence has been identified: UUAUUUA(T/A)(T/A), which correlates with the unstable nature of these messages (Zubiaga *et al*, 1995). The presence of multiples of this motif is strongly indicative of increased instability, which is thought to be achieved by deadenylation of the polyA tail of the mRNA. VEGF contains two such nonameric instability sequences, in addition to numerous 5-nucleotide core sequence units (AUUUA). Removal of these sequences results in increased message stability and it is possible that these regions can act either by a *cis* or *trans* mechanism. These sequences may affect secondary structure formation and mediate changes in mRNA stability; proteins present in hypoxic cell extracts, which have been mapped to the same area, have also been demonstrated to increase the stability of the message. To block the increased message stability induced by hypoxic conditions the approach is to prevent the secondary structure formation or to block binding of the *trans* acting factors, by targeting the mRNA with anti-sense oligonucleotides. An alternative approach is to block the binding of the protein by providing an excess of the sequence at which the protein binds, which in this case encompasses the nonameric AU-rich consensus motif.

The AU-rich instability elements are shown below, and are positioned at 1223 to 1231 (A) and 1726 to 1734 bases (B) respectively downstream of the end of the coding region (GenBank Accession Number Y08736).

A

nonameric
instability Poly A instability
Poly A

5′ AAAGTGTTTTATATACGGTAC**TTATTTAAT**ATCCCTTTTTAATTAGAA**ATTAAA**ACAGTTA**ATTTAATTAAA**GATAGGGTTTTTTTTCA

B

nonameric
instability instability

5′ TTTTTTA**ATTTTA**ATATTTGTTATCAT**TTATTTATT**GGTGCTACTGTTTATCCGTAATAATT

f) Poly A Sites

The instability sequences appear to be closely associated with the poly A sequences, of which four have been identified in VEGF. These are positioned at 388, 1250, 1268 and 1891 bases downstream of the end of the VEGF coding region (GenBank Accession Number Y08736). The most commonly used poly A site has been defined as the site furthest from the end of the coding region which results in a 3.7kb mRNA product (Levy *et al*, 1995). Targeting of oligonucleotides spanning and adjacent to these potential poly A sites, with particular emphasis on the site at 1891, might influence the stability of the mRNA products. The sequences surrounding these four sites are shown below:

388 position:

instability Poly A instability

5′ ATAC**ATTTA**TATATATATATATTATATATATATAAA**AATAAA**TATCTCT**ATTTTA**TATATATAAAATATATA

1250 and 1268 positions:

nonameric
instability Poly A instability
Poly A

5′ AAAGTGTTTTATATACGGTAC**TTATTTAAT**ATCCCTTTTTAATTAGAA**ATTAAA**ACAGTTA**ATTTAATTAAA**GATAGGGTTTTTTTTCA

531

1891 position:

5′ Poly A instability

TCTTAAAAAAAAAAAAAGCATTTTGT**ATTAAA**GA**ATTTA**ATTCTGATCTCAAAGCTCCTCTT

Oligonucleotides are designed in an anti-sense format that will bind directly with the mRNA and potentially alter the secondary structure or prevent binding of *trans* acting factors.

It will be appreciated that the present invention is particularly useful in the study, treatment or prevention of age-related macular degeneration, by virtue of the successful adenoviral gene transfer to the RPE. Without wishing to be bound by any proposed mechanism for the observed advantages, the higher degree of gene expression in the HRPE7 cells, compared with the F2000

REFERENCES

Aiello *et al*
New England Journal of Medicine, 1994 331 1980-1987

Akhtar, S. and Ivinson, A.J.
Nature Genetics, 1993 4 215-217

Algvere, P.V.
Graefes Arch. Clin. Exp. Ophthalmol., 1994 232 707-716

Bennett *et al*
IOVS, 1994 35 2535-2542

Bok, D. and Young
The Retinal Pigment Epithelium
Ed Zina K and Marmor M (Harvard University Press, 1979)
148-174

Boris-Lawrie, K.A.
Genetics and Development, 1993 3 102-109

Breier, G., Albrecht, U., Sterrer, S. and Risau, W.
Development, 1992 114 521-532.

Ciliberto, G., Castagnoli, L. and Cortese, R.
Developmental Biology, 1983 18 59-88

Culver, K.W. *et al*
Science, 1992 256 1550-1552

Davis, A.A., Bernstein, P.S., Bok, D., Turner, J.,
Nachtigal, M. and Hunt, R.C.
Invest. Ophthalmol. Vis. Sci., 1995 36 955-964.

Engler, C.B. *et al*
ACTA Ophthalmologica, 1994 71 27-31

Folkman, J., Haudenschild, C.C. and Zetter, B.R.
Proc. Natl. Acad. Sci., USA, 1979 76 5217-5221

Fung, W.E.
Ophthalmol., 1991 110 1383-1384

Ghadge, G.D., Malhotra, P., Furtadao, M.R., Dhar and Thimmapaya, B.
J. Virol., 1994 68 4137-4151

Graham, F.C. *et al*
Gene Transfer and Expression Protocols, The Humane Press Inc., Clifton, NJ, USA 1991:101-128

Gunning, P., Leavitt, J., Muscat, G., Ng, S. and Kedes, L.
Proc. Natl. Acad. Sci. USA, 1987 84 4831-4835.

Guyer, D.R. *et al*
Am. J. Ophthalmol., 1992 112 349-350

Haralabopoulos, G.C., Grant, D.S., Kleinman, H.K., Lelkes, P.I., Papaioannou, S.P. and Maragoudakis, M.E.
Lab. Invest., 1994 71 575-582.

Hata *et al*
Virchows Arch., 1995 426 479-486

Helene, C.
Eur. J. Cancer, 1991 27 1466-1471

Hitt, M., Brett, A.J., Prevec, L. and Graham, F.L.
Cell Biology: A Laboratory Handbook, J. Celis (ed), Academic Press N.Y. 1994

Hudson, H., Frambach, D. and Lopez, P.
Brit. J. Ophthalmol., 1995 79 417-423

Ibanez, H.E. *et al*
Arch. Ophthalmol., 1995 113 62-69

Johnson, P.A.
J. Virology, 1992 66 2952-2965

Kaneda, Y. *et al*
Exp. Cell Res., 1987 173 56-69

Kennedy, C.J. *et al*
Exp. Cell Res., 1994 210 209-214

CLAIMS

1. A composition comprising a nucleic acid sequence and a hyaluronic acid or a derivative thereof, together with a pharmaceutically-acceptable carrier, wherein the nucleic acid is either an anti-sense nucleic acid directed against a target sequence or a sense nucleic acid encoding a desired protein.

2. A composition according to Claim 1, in which the nucleic acid is a nucleotide sequence which is in the anti-sense orientation to a target sequence.

3. A composition according to Claim 2, in which the target nucleic acid sequence is a genomic DNA, a cDNA, a messenger RNA or an oligonucleotide.

4. A composition according to Claim 1, in which the nucleic acid is present in a vector comprising a nucleic acid sequence to be transferred into a target cell.

5. A composition according to Claim 4, in which the nucleic acid sequence to be transferred is a genomic DNA, a cDNA, a messenger RNA or an oligonucleotide.

6. A composition according to Claim 5, wherein the vector comprises a sense sequence to be provided to a target cell in order to exert a function.

7. A composition according to Claim 6, in which the vector comprises an anti-sense sequence to be provided to a target cell in order to inhibit the functioning of a nucleic acid present in the target cell.

8. A composition according to any one of Claims 1 to 7, in which the vector is a liposome.

9. A composition according to any one of Claims 1 to 8, in which the vector is a virus.

10. A composition according to any one of Claims 1 to 9, in which the virus is an adenovirus, an adeno-associated virus, a herpes virus or a retrovirus.

11. A composition according to Claim 9, in which the virus is a replication-defective adenovirus.

12. A composition according to Claim 11, where the virus is a replication-defective adenovirus comprising a promoter selected from the group consisting of respiratory syncytial virus promoter, cytomegalovirus promoter,

09/065082

PATENT COOPERATION TREATY

PCT

INTERNATIONAL PRELIMINARY EXAMINATION REPORT

(PCT Article 36 and Rule 70)

Applicant's or agent's file reference VS:LM:FP4167	**FOR FURTHER ACTION**	See Notification of Transmittal of International Preliminary Examination Report (Form PCT/IPEA/416).
International application No. **PCT/AU 96/00664**	International filing date 22 October 1996	Priority Date 23 October 1995
International Patent Classification (IPC) or national classification and IPC **Int. Cl.**[6] A61K 47/36, A61K 48/00		
Applicant (1) HYAL PHARMACEUTICAL AUSTRALIA LIMITED (2) ROKOCZY, Piroska Elizabeth et al		

1. This international preliminary examination report has been prepared by this International Preliminary Examining Authority and is transmitted to the applicant according to Article 36.

2. This REPORT consists of a total of 8 sheets, including this cover sheet.

[X] This report is also accompanied by ANNEXES, i.e., sheets of the description, claims and/or drawings which have been amended and are the basis for this report and/or sheets containing rectifications made before this Authority (see Rule 70.16 and Section 607 of the Administrative Instructions under the PCT).

These annexes consist of a total of 11 sheet(s).

3. This report contains indications relating to the following items:

I	[X]	Basis of the report
II	[ ]	Priority
III	[ ]	Non-establishment of opinion with regard to novelty, inventive step and industrial applicability
IV	[X]	Lack of unity of invention
V	[X]	Reasoned statement under Article 35(2) with regard to novelty, inventive step or industrial applicability; citations and explanations supporting such statement
VI	[X]	Certain documents cited
VII	[ ]	Certain defects in the international application
VIII	[X]	Certain observations on the international application

Date of submission of the demand 1 May 1997	Date of completion of the report 5 February 1998
Name and mailing address of the IPEA/AU AUSTRALIAN INDUSTRIAL PROPERTY ORGANISATION PO BOX 200 WODEN ACT 2606 AUSTRALIA Facsimile No. (02) 6285 3929	Authorized Officer **JAYNE BRITON** Telephone No. (02) 6283 2246

INTERNATIONAL PRELIMINARY EXAMINATION REPORT

International application No.
PCT/AU 96/00664

I. Basis of the report

1. This report has been drawn on the basis of *(Replacement sheets which have been furnished to the receiving Office in response to an invitation under Article 14 are referred to in this report as "originally filed" and are not annexed to the report since they do not contain amendments.)*:

☐ the international application as originally filed.

☒ the description, pages **1-11, 14-55, 58-59,** as originally filed,
pages , filed with the demand,
pages **56, 57, 57a,** filed with the letter of **10 October 1997,**
pages **12-13,** filed with the letter of **12 January 1998.**

☒ the claims, Nos. **12 (part) - 23 (part),** as originally filed,
Nos. , as amended under Article 19,
Nos. , filed with the demand,
Nos. **1-12 (part), 23 (part) - 61,** filed with the letter of **12 January 1998,**
Nos. , filed with the letter of .

☒ the drawings, sheets/fig **Fig 1-13,** as originally filed,
sheets/fig , filed with the demand,
sheets/fig , filed with the letter of ,
sheets/fig , filed with the letter of .

2. The amendments have resulted in the cancellation of:

☐ the description, pages

☐ the claims, Nos.

☐ the drawings, sheets/fig

3. ☒ This report has been established as if (some of) the amendments had not been made, since they have been considered to go beyond the disclosure as filed, as indicated in the Supplemental Box (Rule 70.2(c)).

4. Additional observations, if necessary:

Claims 17 to 20 and 48 to 57 do not require an international preliminary examination because they are directed to methods of treatment of the human or animal body. The claims have nonetheless been considered because the subject matter does not contravene Australian law.

IV. Lack of unity of invention

1. In response to the invitation to restrict or pay additional fees the applicant has:

- [ ] restricted the claims.
- [X] paid additional fees.
- [ ] paid additional fees under protest.
- [ ] neither restricted nor paid additional fees.

2. [ ] This Authority found that the requirement of unity of invention is not complied with and chose, according to Rule 68.1, not to invite the applicant to restrict or pay additional fees.

3. This Authority considers that the requirement of unity of invention in accordance with Rules 13.1, 13.2 and 13.3 is

- [ ] complied with.
- [ ] not complied with for the following reasons:

4. Consequently, the following parts of the international application were the subject of international preliminary examination in establishing this report:

- [X] all parts.
- [ ] the parts relating to claims Nos.

V. Reasoned statement under Article 35(2) with regard to novelty, inventive step or industrial applicability; citations and explanations supporting such statement

1. Statement

Novelty (N)	Claims	2-16,18,20,22-31,33,39-47,49,56,58-61	YES
	Claims	1,17,19,21,32,34-38,48,50-55,57	NO
Inventive step (IS)	Claims	2-16,18,20,22-31,33,40,44,49,58-61	YES
	Claims	1,17,19,21,32,34-39,41-43,45-48,50-57	NO
Industrial applicability (IA)	Claims	1-61	YES
	Claims		NO

2. Citations and explanations

Citations

1. AU A *42171/89 (632289) (PIER AUGE) 2 April 1990
(* family equivalent of WO 90/02774)

2. WO A 95/04142 (HYBRIDON INC) 9 February 1995

NOVELTY (N)

Claims 1, 17, 19 and 21 are not novel in light of citation 1. Citation 1 discloses a composition of hyaluronic acid and DNA. All that the claims define is a composition of a nucleic acid and hyalvronic acid and treatment using such composition. The use of words such as "encoding a specific protein" are not enough to confer novelty on the composition. DNA is known to encode specific proteins and it is an inherent feature of the prior art. The attorneys comments have been considered but are not convincing. While it is true that the described invention may differ from the prior art, the claimed invention includes within its scope the prior art.

Claims 32, 34 to 38, 48, 50 to 55 and 57 are not novel in light of citation 2. The citation discloses the treatment of a retinal disease mediated by neovascularisation, namely diabetic retinopathy, by administering compositions the same as the present invention (for example see page 2).

The attorneys arguments were considered, but are not convincing. Rebuttal based on the use of viruses is not relevant to composition claims. Other features raised by attorney, such as viral production of DNA within the cell, are not defined in the method claims and so are not relevant.

INVENTIVE STEP (IS)

Claims 39, 41 to 43, 45 to 47 and 54 to 56 do not define an inventive step in light of citation 2. Antisense VEGF is known as a treatment. Therefore it is obvious to use any method available to increase the efficacy of such a treatment. The combination of hyaluronic acid and antisense VEGF appears to be new. However the use of other known methods to either, facilitate uptake of the DNA or to provide long term retention of the DNA by incorporation into the genome, cannot be considered inventive.

continued

VI. Certain documents cited

1. Certain published documents (Rule 70.10)

Application No. Patent No.	Publication date *(day/month/year)*	Filing date *(day/month/year)*	Priority date (valid claim) *(day/month/year)*
P,X WO 96/23065	1 August 1996	26 January 1996	1 August 1996
P,X WO 96/27006	6 September 1996	29 February 1996	2 March 1995

(WO 96/23065). This document discloses the features of claims 32 to 54. for example see page 10 paragraphs 2 and 3 and page 13 paragraph 1.

(WO 96/27006). This document discloses the features of claims 32 to 54. For example see page 12 paragraphs 2 and 3.

2. Non-written disclosures (Rule 70.9)

Kind of non-written disclosure	Date of non-written disclosure *(day/month/year)*	Date of written disclosure referring to non-written disclosure *(day/month/year)*

VIII. Certain observations on the international application

The following observations on the clarity of the claims, description, and drawings or on the question whether the claims are fully supported by the description, are made:

Claim 49 is unclear. It purports to be a composition, but is appended to a claim defining a method.

Supplemental Box

(To be used when the space in any of the preceding boxes is not sufficient)

Continuation of : BOX I

Amendments to incorporate two new figures (Figures 14 and 15), and two new examples (Examples 19 and 20) are considered to go beyond the disclosure in the international application as filed.

The attorneys arguments have been considered but are not persuasive. The very general disclosures at page 15 lines 23-26 and page 4 lines 7 to 16 do not provide sufficient basis for examples 19 and 20 respectively. for example, the disclosure on page 4 discusses the general state of the prior art, whereas example 20 discloses target sites for antisense VEGF.

Supplemental Box

(To be used when the space in any of the preceding boxes is not sufficient)

Continuation of : BOX V

Furthermore, rebuttal directed to the length of antisense VEGF is not convincing. Citation 2 also discloses antisense VEGF which is 21 bases long (see SEQ ID No. 2 page 11 line 15, claim 41). the citation states that "it is expected that variations in the length of the oligonucleotides can be made ..." (page 11 line 12 to 13). Thus there is a clear teaching in the citation that is not essential to limit the size of the oligonucleotide to less than 21 bases.

For the purposes of this specification the term "comprising" is to be understood to mean "including but not limited to".

The invention also provides a method of treatment of a pathological condition in a subject in need of such treatment, comprising the step of administering an effective dose of a composition according to the invention to said subject.

It will be clearly understood that the dose and route of administration will depend upon the condition to be treated, and the attending physician or veterinarian will readily be able to determine suitable doses and routes. It is contemplated that the compositions of the invention may be administered parenterally, for example by intravenous or subcutaneous injection, topically, for example adsorbed on gels or sponges, or directly into the tissue to be treated, for example by intra-ocular or intra-tumoral injection.

The subject to be treated may be a human, or may be an animal, particularly domestic or companion mammals such as cattle, horse, sheep, goats, cats and dogs.

In the compositions of the invention the nucleic acid or vector may simply be mixed with the hyaluronic acid, or may optionally be physically or chemically coupled to hyaluronic acid.

In a preferred embodiment this aspect of the invention provides compositions and methods for treatment of a retinal disease mediated by abnormal vascularization, in which the nucleic acid is an anti-sense nucleic acid sequence corresponding to at least a part of the sequence encoding vascular endothelial growth factor (VEGF), and is administered together with a hyaluronic acid as described below.

Many forms of HA are suitable for use for the purposes of the invention. In particular, both low and high molecular weight forms of HA may be used. The only requirement is that the HA be of a degree of purity and

sterility to be suitable for pharmaceutical use; preferably the HA is also pyrogen-free. High molecular weight preparation of HA may require dilution prior to use. In particular, commercially-available HA products suitable for use in the invention are those supplied by Hyal Pharmaceutical Corporation, Mississauga, which is a 2% solution of HA having a mean average molecular weight of about 225,000; sodium hyaluronate produced by Life Core™ Biomedical, Inc.; Pro Visc (Alcon Laboratories); and "HEALON" (Pharmacia AB, Uppsala). It will be clearly understood that for the purposes of this specification, the term derivatives of HA encompasses homologues, analogues, complexes, esters and fragments and sub-units of HA.

Derivatives of HA which may be used in the invention include pharmaceutically-acceptable salts thereof, or fragments or subunits of HA. The person skilled in the art will readily be able to determine whether a given preparation of HA, or a particular derivative, complex *etc.* of HA, is suitable for use in the invention.

According to a second aspect, the invention relates to a composition for treatment of a retinal disease mediated by abnormal vascularisation, comprising an anti-sense nucleic acid sequence corresponding to at least a part of the sequence encoding vascular endothelial growth factor (VEGF), and optionally further comprising one or more adjuvants such as hyaluronic acid or a dendrimer compound for increasing cellular uptake, together with a pharmaceutically acceptable carrier. The use of dendrimer compounds to transport genetic material into target cells is disclosed in International Patent Application No. WO 95/24221 by Dendritech Inc *et al.*

REFERENCES

Aiello *et al*
New England Journal of Medicine, 1994 331 1980-1987

Akhtar, S. and Ivinson, A.J.
Nature Genetics, 1993 4 215-217

Algvere, P.V.
Graefes Arch. Clin. Exp. Ophthalmol., 1994 232 707-716

Bennett *et al*
IOVS, 1994 35 2535-2542

Bok, D. and Young
The Retinal Pigment Epithelium
Ed Zina K and Marmor M (Harvard University Press, 1979)
148-174

Boris-Lawrie, K.A.
Genetics and Development, 1993 3 102-109

Breier, G., Albrecht, U., Sterrer, S. and Risau, W.
Development, 1992 114 521-532.

Ciliberto, G., Castagnoli, L. and Cortese, R.
Developmental Biology, 1983 18 59-88

Culver, K.W. *et al*
Science, 1992 256 1550-1552

Davis, A.A., Bernstein, P.S., Bok, D., Turner, J.,
Nachtigal, M. and Hunt, R.C.
Invest. Ophthalmol. Vis. Sci., 1995 36 955-964.

Engler, C.B. *et al*
ACTA Ophthalmologica, 1994 71 27-31

Folkman, J., Haudenschild, C.C. and Zetter, B.R.
Proc. Natl. Acad. Sci., USA, 1979 76 5217-5221

Fung, W.E.
Ophthalmol., 1991 110 1383-1384

Ghadge, G.D., Malhotra, P., Furtadao, M.R., Dhar and Thimmapaya, B.
J. Virol., 1994 68 4137-4151

Graham, F.C. *et al*
Gene Transfer and Expression Protocols, The Humane Press Inc., Clifton, NJ, USA 1991:101-128

Gunning, P., Leavitt, J., Muscat, G., Ng, S. and Kedes, L.
Proc. Natl. Acad. Sci. USA, 1987 84 4831-4835.

Guyer, D.R. *et al*
Am. J. Ophthalmol., 1992 112 349-350

Haralabopoulos, G.C., Grant, D.S., Kleinman, H.K., Lelkes, P.I., Papaioannou, S.P. and Maragoudakis, M.E.
Lab. Invest., 1994 71 575-582.

Hata *et al*
Virchows Arch., 1995 426 479-486

Helene, C.
Eur. J. Cancer, 1991 27 1466-1471

Hitt, M., Brett, A.J., Prevec, L. and Graham, F.L.
Cell Biology: A Laboratory Handbook, J. Celis (ed), Academic Press N.Y. 1994

Hudson, H., Frambach, D. and Lopez, P.
Brit. J. Ophthalmol., 1995 79 417-423

Ibanez, H.E. *et al*
Arch. Ophthalmol., 1995 113 62-69

Johnson, P.A.
J. Virology, 1992 66 2952-2965

Kaneda, Y. *et al*
Exp. Cell Res., 1987 173 56-69

Kennedy, C.J. *et al*
Exp. Cell Res., 1994 210 209-214

THE CLAIMS DEFINING THE INVENTION ARE AS FOLLOWS:

1. A composition comprising

(a) a nucleic acid sequence encoding a specific protein and

(b) a hyaluronic acid or a derivative thereof,

together with a pharmaceutically-acceptable carrier, wherein the nucleic acid is either an anti-sense nucleic acid directed against a target sequence or a sense nucleic acid encoding a specific desired protein.

2. A composition according to Claim 1, in which the nucleic acid is a nucleotide sequence which is in the anti-sense orientation to a target sequence.

3. A composition according to Claim 2, in which the target nucleic acid sequence is a genomic DNA, a cDNA, a messenger RNA or an oligonucleotide.

4. A composition according to Claim 1, in which the nucleic acid is present in a vector comprising a nucleic acid sequence to be transferred into a target cell.

5. A composition according to Claim 4, in which the nucleic acid sequence to be transferred is a genomic DNA, a cDNA, a messenger RNA or an oligonucleotide.

6. A composition according to Claim 5, wherein the vector comprises a sense sequence to be provided to a target cell in order to exert a function.

7. A composition according to Claim 6, in which the vector comprises an anti-sense sequence to be provided to a target cell in order to inhibit the functioning of a nucleic acid present in the target cell.

8. A composition according to any one of Claims 4 to 7, in which the vector is a liposome.

9. A composition according to any one of Claims 4 to 8, in which the vector is a virus.

10. A composition according to Claim 9, in which the virus is an adenovirus, an adeno-associated virus, a herpes virus or a retrovirus.

11. A composition according to Claim 9, in which the virus is a replication-defective adenovirus.

12. A composition according to Claim 11, where the virus is a replication-defective adenovirus comprising a promoter selected from the group consisting of respiratory syncytial virus promoter, cytomegalovirus promoter,

RECEIVED 12 JAN 1998

comprising a nucleic acid sequence to be transferred into a target cell.

24. A composition according to Claim 23, in which the vector is a virus.

25. A composition according to Claim 24, in which the virus is an adenovirus, an adeno-associated virus, a herpes virus or a retrovirus.

26. A composition according to Claim 24 or Claim 25, in which the viral vector is a replication-defective recombinant virus.

27. A composition according to Claim 26, where the virus is a replication-defective adenovirus comprising a promoter selected from the group consisting of respiratory syncytial virus promoter, cytomegalovirus promoter, adenovirus major late protein (MLP), VA1 pol III and β-actin promoters.

28. A composition according to Claim 27, wherein the vector is pAd.RSV, pAd.MLP or pAd.VA1.

29. A composition according to Claim 27, wherein the vector is Ad.RSV.αVEGF or Ad.VA1.αVEGF.

30. A composition according to any one of Claims 1 to 29, wherein the vector also comprises a polyadenylation signal sequence.

31. A composition according to Claim 30, wherein the polyadenylation signal sequence is the SV40 signal sequence.

32. A composition for treatment of a retinal disease mediated by abnormal vascularization, comprising an anti-sense nucleic acid sequence corresponding to at least a part of the sequence encoding VEGF, and optionally further comprising one or more adjuvants for increasing cellular uptake, together with a pharmaceutically-acceptable carrier.

33. A composition according to Claim 32, comprising as adjuvant hyaluronic acid or a derivative thereof.

34. A composition according to Claim 32 or Claim 33, wherein the anti-sense sequence has 100% complementarity to a corresponding region of the gene encoding VEGF.

35. A composition for short-term treatment according to Claim 32 or Claim 33, wherein the anti-sense sequence is 16 to 50 nucleotides long.

36. A composition for short-term treatment according to Claim 32 or Claim 33, wherein the anti-sense sequence is 16 to 22 nucleotides long.

37. A composition for short-term treatment according to Claim 32 or Claim 33, wherein the anti-sense sequence is 16 to 19 nucleotides long.

38. A composition according to Claim 32 or Claim 33, wherein a modified oligonucleotide as herein defined is used, and the anti-sense sequence is 7 to 50 nucleotides long.

39. A composition for long-term treatment of a retinal disease mediated by abnormal vascularisation, comprising a recombinant virus comprising an anti-sense nucleic acid sequence corresponding to at least part of the sequence encoding VEGF, together with a pharmaceutically-acceptable carrier, wherein the anti-sense sequence is between 20 nucleotides in length and the full length sequence encoding VEGF.

40. A composition according to Claim 39, further comprising as adjuvant hyaluronic acid or a derivative thereof.

41. A composition according to Claim 39, or Claim 40, wherein the anti-sense sequence is between 50 nucleotides long and the full length sequence of VEGF.

42. A composition according to any one of Claims 22 to 41, wherein the VEGF sequence is that of VEGF from human retinal pigment epithelial cells or choroidal endothelial cells.

43. A composition for treatment of a retinal disease mediated by abnormal vascularisation, wherein said treatment is effective for an indefinite period, comprising

a virus comprising an anti-sense DNA corresponding to at least part of the sequence encoding VEGF, together with a pharmaceutically-acceptable carrier, wherein said virus is one capable of integrating the anti-sense sequence into the genome of the target cell.

44. A composition according to Claim 43, further comprising as adjuvant hyaluronic acid or a derivative thereof.

45. A composition according to Claim 43 or Claim 44, wherein the virus is an adeno-associated virus.

46. A composition according to Claim 43, Claim 44 or Claim 45, wherein the anti-sense sequence is between 20 nucleotides long and the full length sequence of VEGF.

47. A composition according to Claim 43, Claim 44 or Claim 45, wherein the anti-sense sequence is between 50 nucleotides long and the full length sequence of VEGF.

48. A method of treatment of a retinal disease mediated by abnormal neovascularisation, comprising the step of administering an effective amount of an anti-sense nucleic acid sequence corresponding to at least part of the sequence encoding VEGF into the eye(s) of a subject in need of such treatment, thereby to inhibit neovascularisation.

49. A composition according to Claim 48, further comprising as adjuvant hyaluronic acid or a derivative thereof.

50. A method according to Claim 48 or Claim 49, wherein the anti-sense sequence is 16 to 50 nucleotides long.

51. A method according to Claim 48 or Claim 49, wherein the anti-sense sequence is 16 to 22 nucleotides long.

52. A method according to Claim 48 or Claim 49, wherein the anti-sense sequence is 16 to 19 nucleotides long.

53. A method according to Claim 48 or Claim 49, wherein a modified oligonucleotide as herein defined is used, and the anti-sense sequence is 7 to 50 nucleotides long.

54. A method of treatment of a retinal disease mediated by abnormal neovascularisation, comprising the step of administering an effective amount of a composition

according to any one of claims 22 to 47 to a subject in need of such treatment

55. A method of treatment of a retinal disease mediated by abnormal neovascularisation, comprising the step of administering a composition according to any one of Claims 39 to 42 to the eye(s) of a subject in need of such treatment, thereby to inhibit neovascularisation in the long term.

56. A method of treatment of a retinal disease mediated by abnormal neovascularisation, comprising the step of administering an effective amount of a composition according to Claims 42 to 47 into the eye(s) of a subject in need of such treatment, thereby to inhibit neovascularisation for an indefinite period.

57. A method according to any one of Claims 48 to 56, wherein the retinal disease is selected from the group consisting of age-related macular degeneration, diabetic retinopathy, branch or central retinal vein occlusion, retinopathy of prematurity, rubeosis iridis and corneal neovascularisation.

58. A method of promoting uptake of an exogenous nucleic acid sequence by a target cell, comprising the step of exposing the cell to the nucleic acid, or to a virus or vector comprising the nucleic acid, in the presence of a hyaluronic acid or a derivative thereof.

59. A method according to Claim 58, in which the target cell is a phagocytic cell.

60. A method according to Claim 58 or Claim 59, in which the nucleic acid and hyaluronic acid are administered together *in vitro*.

61. A method according to Claim 58 or Claim 59, in which the nucleic acid and hyaluronic acid are administered together *in vivo*.

PATENT COOPERATION TREATY

From the:
INTERNATIONAL PRELIMINARY EXAMINING AUTHORITY

To:

Griffith Hack
GPO Box 1285K
MELBOURNE VIC 3001

GRIFFITH HACK
11 FEB 1998
VS

PCT

NOTIFICATION OF TRANSMITTAL OF INTERNATIONAL PRELIMINARY EXAMINATION REPORT

(PCT Rule 71.1)

Date of mailing *day/month/year* 10 FEB 1998

Applicant's or agent's file reference
VS:LM:FP4167

IMPORTANT NOTIFICATION

International application No.	International filing date	Priority date
PCT/AU 96/00664	22 October 1996	23 October 1995

Applicant
(1) HYAL PHARMACEUTICAL AUSTRALIA LIMITED
(2) ROKOCZY, Piroska Elizabeth et al

1. The applicant is hereby notified that this International Preliminary Examining Authority transmits herewith the international preliminary examination report and its annexes, if any, established on the international application.

2. A copy of the report and its annexes, if any, is being transmitted to the International Bureau for communication to all the elected Offices.

3. Where required by any of the elected Offices, the International Bureau will prepare an English translation of the report (but not of any annexes) and will transmit such translations to those Offices.

4. **REMINDER**

The applicant must enter the national phase before each elected Office by performing certain acts (filing translations and paying national fees) within 30 months from the priority date (or later in some Offices)(Article 39(1))(see also the reminder sent by the International Bureau with Form PCT/IB/301).

Where a translation of the international application must be furnished to an elected Office, that translation must contain a translation of any annexes to the international preliminary examination report. It is the applicant's responsibility to prepare and furnish such translation directly to each elected Office concerned.

For further details on the applicable time limits and requirements of the elected Offices, see Volume II of the PCT Applicant's Guide

Name and mailing address of the IPEA/AU	Authorized officer
AUSTRALIAN INDUSTRIAL PROPERTY ORGANISATION PO BOX 200 WODEN ACT 2606 AUSTRALIA Facsimile No.: (02) 6285 3929	Jayne Briton **JAYNE BRITON** Telephone No. (02) 6283 2246

PATENT COOPERATION TREATY

PCT

INTERNATIONAL PRELIMINARY EXAMINATION REPORT

(PCT Article 36 and Rule 70)

Applicant's or agent's file reference VS:LM:FP4167	**FOR FURTHER ACTION**	See Notification of Transmittal of International Preliminary Examination Report (Form PCT/IPEA/416).
International application No. PCT/AU 96/00664	International filing date 22 October 1996	Priority Date 23 October 1995
International Patent Classification (IPC) or national classification and IPC Int. Cl.[6] A61K 47/36, A61K 48/00		
Applicant (1) HYAL PHARMACEUTICAL AUSTRALIA LIMITED (2) ROKOCZY, Piroska Elizabeth et al		

1. This international preliminary examination report has been prepared by this International Preliminary Examining Authority and is transmitted to the applicant according to Article 36.

2. This REPORT consists of a total of 8 sheets, including this cover sheet.

[X] This report is also accompanied by ANNEXES, i.e., sheets of the description, claims and/or drawings which have been amended and are the basis for this report and/or sheets containing rectifications made before this Authority (see Rule 70.16 and Section 607 of the Administrative Instructions under the PCT).

These annexes consist of a total of 11 sheet(s).

3. This report contains indications relating to the following items:

I	[X]	Basis of the report
II	[ ]	Priority
III	[ ]	Non-establishment of opinion with regard to novelty, inventive step and industrial applicability
IV	[X]	Lack of unity of invention
V	[X]	Reasoned statement under Article 35(2) with regard to novelty, inventive step or industrial applicability; citations and explanations supporting such statement
VI	[X]	Certain documents cited
VII	[ ]	Certain defects in the international application
VIII	[X]	Certain observations on the international application

Date of submission of the demand 1 May 1997	Date of completion of the report 5 February 1998
Name and mailing address of the IPEA/AU AUSTRALIAN INDUSTRIAL PROPERTY ORGANISATION PO BOX 200 WODEN ACT 2606 AUSTRALIA Facsimile No. (02) 6285 3929	Authorized Officer **JAYNE BRITON** Telephone No. (02) 6283 2246

International application No.
PCT/AU 96/00664

I. Basis f the report

1. This report has been drawn on the basis of *(Replacement sheets which have been furnished to the receiving Office in response to an invitation under Article 14 are referred to in this report as "originally filed" and are not annexed to the report since they do not contain amendments.)*:

☐ the international application as originally filed.

☒ the description, pages **1-11, 14-55, 58-59,** as originally filed,
pages , filed with the demand,
pages **56, 57, 57a,** filed with the letter of **10 October 1997,**
pages **12-13,** filed with the letter of **12 January 1998.**

☒ the claims, Nos. **12 (part) - 23 (part),** as originally filed,
Nos. , as amended under Article 19,
Nos. , filed with the demand,
Nos. **1-12 (part), 23 (part) - 61,** filed with the letter of **12 January 1998,**
Nos. , filed with the letter of .

☒ the drawings, sheets/fig **Fig 1-13,** as originally filed,
sheets/fig , filed with the demand,
sheets/fig , filed with the letter of ,
sheets/fig , filed with the letter of .

2. The amendments have resulted in the cancellation of:

☐ the description, pages

☐ the claims, Nos.

☐ the drawings, sheets/fig

3. ☒ This report has been established as if (some of) the amendments had not been made, since they have been considered to go beyond the disclosure as filed, as indicated in the Supplemental Box (Rule 70.2(c)).

4. Additional observations, if necessary:

Claims 17 to 20 and 48 to 57 do not require an international preliminary examination because they are directed to methods of treatment of the human or animal body. The claims have nonetheless been considered because the subject matter does not contravene Australian law.

IV. Lack of unity of invention

1. In response to the invitation to restrict or pay additional fees the applicant has:

- [ ] restricted the claims.
- [X] paid additional fees.
- [ ] paid additional fees under protest.
- [ ] neither restricted nor paid additional fees.

2. [ ] This Authority found that the requirement of unity of invention is not complied with and chose, according to Rule 68.1, not to invite the applicant to restrict or pay additional fees.

3. This Authority considers that the requirement of unity of invention in accordance with Rules 13.1, 13.2 and 13.3 is

- [ ] complied with.
- [ ] not complied with for the following reasons:

4. Consequently, the following parts of the international application were the subject of international preliminary examination in establishing this report:

- [X] all parts.
- [ ] the parts relating to claims Nos.

V. **Reasoned statement under Article 35(2) with regard to novelty, inventive step or industrial applicability; citations and explanations supporting such statement**

1. Statement

Novelty (N)	Claims	2-16,18,20,22-31,33,39-47,49,56,58-61	YES
	Claims	1,17,19,21,32,34-38,48,50-55,57	NO
Inventive step (IS)	Claims	2-16,18,20,22-31,33,40,44,49,58-61	YES
	Claims	1,17,19,21,32,34-39,41-43,45-48,50-57	NO
Industrial applicability (IA)	Claims	1-61	YES
	Claims		NO

2. Citations and explanations

Citations

1. AU A *42171/89 (632289) (PIER AUGE) 2 April 1990
(* family equivalent of WO 90/02774)

2. WO A 95/04142 (HYBRIDON INC) 9 February 1995

NOVELTY (N)

Claims 1, 17, 19 and 21 are not novel in light of citation 1. Citation 1 discloses a composition of hyaluronic acid and DNA. All that the claims define is a composition of a nucleic acid and hyalvronic acid and treatment using such composition. The use of words such as "encoding a specific protein" are not enough to confer novelty on the composition. DNA is known to encode specific proteins and it is an inherent feature of the prior art. The attorneys comments have been considered but are not convincing. While it is true that the described invention may differ from the prior art, the claimed invention includes within its scope the prior art.

Claims 32, 34 to 38, 48, 50 to 55 and 57 are not novel in light of citation 2. The citation discloses the treatment of a retinal disease mediated by neovascularisation, namely diabetic retinopathy, by administering compositions the same as the present invention (for example see page 2).

The attorneys arguments were considered, but are not convincing. Rebuttal based on the use of viruses is not relevant to composition claims. Other features raised by attorney, such as viral production of DNA within the cell, are not defined in the method claims and so are not relevant.

INVENTIVE STEP (IS)

Claims 39, 41 to 43, 45 to 47 and 54 to 56 do not define an inventive step in light of citation 2. Antisense VEGF is known as a treatment. Therefore it is obvious to use any method available to increase the efficacy of such a treatment. The combination of hyaluronic acid and antisense VEGF appears to be new. However the use of other known methods to either, facilitate uptake of the DNA or to provide long term retention of the DNA by incorporation into the genome, cannot be considered inventive.

continued

VI. Certain documents cited

1. Certain published documents (Rule 70.10)

Application No. Patent No.	Publication date *(day/month/year)*	Filing date *(day/month/year)*	Priority date (valid claim) *(day/month/year)*
P,X WO 96/23065	1 August 1996	26 January 1996	1 August 1996
P,X WO 96/27006	6 September 1996	29 February 1996	2 March 1995

(WO 96/23065). This document discloses the features of claims 32 to 54. for example see page 10 paragraphs 2 and 3 and page 13 paragraph 1.

(WO 96/27006). This document discloses the features of claims 32 to 54. For example see page 12 paragraphs 2 and 3.

2. Non-written disclosures (Rule 70.9)

Kind of non-written disclosure	Date of non-written disclosure *(day/month/year)*	Date of written disclosure referring to non-written disclosure *(day/month/year)*

International application No.
PCT/AU 96/00664

Supplemental Box

(To be used when the space in any of the preceding boxes is not sufficient)

Continuation of : BOX I

Amendments to incorporate two new figures (Figures 14 and 15), and two new examples (Examples 19 and 20) are considered to go beyond the disclosure in the international application as filed.

The attorneys arguments have been considered but are not persuasive. The very general disclosures at page 15 lines 23-26 and page 4 lines 7 to 16 do not provide sufficient basis for examples 19 and 20 respectively. for example, the disclosure on page 4 discusses the general state of the prior art, whereas example 20 discloses target sites for antisense VEGF.

Supplemental Box

(To be used when the space in any of the preceding boxes is not sufficient)

Continuation of : BOX V

Furthermore, rebuttal directed to the length of antisense VEGF is not convincing. Citation 2 also discloses antisense VEGF which is 21 bases long (see SEQ ID No. 2 page 11 line 15, claim 41). the citation states that "it is expected that variations in the length of the oligonucleotides can be made ..." (page 11 line 12 to 13). Thus there is a clear teaching in the citation that is not essential to limit the size of the oligonucleotide to less than 21 bases.

VIII. Certain observations n the international applicati n

The following observations on the clarity of the claims, description, and drawings or on the question whether the claims are fully supported by the description, are made:

Claim 49 is unclear. It purports to be a composition, but is appended to a claim defining a method.